



Cardinal Newman Catholic Primary School

Arch Road, Hersham, Surrey KT12 4QT

Telephone: (01932) 222536

Headteacher: Ms G Keany.

PUPIL MEDICATION REQUEST

Child's Name _____

Address: _____

Condition or Illness _____

Parent's Home No: _____ Work: _____

G.P. _____

Please tick the appropriate box

My Child will be responsible for the self-administration of medicines as directed below.

I agree to members of staff administering medicines/providing treatment to my child as directed below or in the case of an emergency, as staff consider necessary.

Signed _____ Date _____

(Parent/guardian)

Name of medicine	Dose	Frequency/times	Completion date of course if known	Expiry date of medicine
Special Instructions				
Allergies				
Other prescribed medicines child takes at home				

NOTE: Where possible the need for medicines to be administered at school should be avoided. Parents are therefore requested to try to arrange the timing of doses accordingly.