Medication Permission Slip

I authorize San Anselmo Preschool and Afterschool Staff to administer the medication(s) listed below to my child. All prescription and non-prescription medications must be in original bottle with original label intact, medication will be dispensed as labeled and medication must be picked up at end of expiration date.

Child's name _____

Medicine _____

Hours to administer _____

Amount per dosage _____

Date _____

Parent's signature _____

Comments _____

_____

_____

Date	Time	Staff signature