CHRISTIAN BROTHERS
ACADEMY

Medication Authorization

Parents and prescribers authorization for administration of medication in school.
All orders **must be** renewed at the beginning of each school year per NYS law.

Student Information

Full Name	Date of Birth	Grade/Section	School Year

Medication Information

Medication	Dosage	Frequency

For Treatment Of	Time to be Taken During School

Medication	Dosage	Frequency

For Treatment Of	Time to be Taken During School

Self-Medication Release

○ This child has been instructed in the proper use of the following medications: and is permitted to carry the medication(s) on him or keep same in his locker or P.E. locker (**with the exception of any controlled substance**). This includes field trips and sports events. He has been instructed in and understands the purpose and appropriate method and frequency of use.

○ This child is considered self-directed for the purposes of **field trips or sports events only**. During said activity it will be recommended that the medication be held by chaperone/coach until it is needed.

○ This child is **not** deemed self-directed and **cannot** carry or self-administer their medication at any time.*

*For Field Trips - A parent must accompany a child who is not self-directed. If a parent cannot attend, they can designate someone who is not an employee of Christian Brothers Academy. If there is no one available, the school will make every attempt to send a nurse.

Note: Any student found sharing their medication with any other person will have self-directed permission rescinded immediately.

Physician's Signature	Physician's Printed Name	Date

I request that my child receive the medication as prescribed above by our physician. The medication is to be furnished by me in the properly labeled original container from the pharmacy. I understand that the school nurse or other designated person in the case of the absence of the school nurse, will administer the medication, including field trips.

Parent Signature	Date

Please either fax (518-452-9817) or mail this authorization to:

Health Office
Christian Brothers Academy
12 Airline Drive
Albany, NY 12205

If you have any questions, please feel free to call the Health Office at (518) 452-9809 ext. 128.