



FORESTVILLE HEALTH OFFICE MEDICATIONS

During the school year, many students are seen in the health office for minor complaints or injuries such as headaches, insect bites, skinned knees, and menstrual cramps. With the permission slip below, the nurse would be authorized to administer the medications listed to treat your child, along with the signatures of your child’s physician. If your child does not see his/her physician prior to September, our school physician will sign the form as long as it is returned with the parent’s signature.

Please indicate the items that you will allow. Without your written authorization, no medications may be used. Both permissions must be renewed each year and may be retracted at any time.

**Any medications other than those listed must be accompanied by your written request, your physician’s written instructions, and be provided by you in an original labeled container.** Please fill out and return the Parent and Physician’s Authorization for Administration of Medication in School and School Activities that is included in this packet.

HEALTH OFFICE MEDICATIONS PARENTAL PERMISSION FORM

Please indicate which medications may be used to treat your child.

<u>Minor Injury/Illness</u>	<u>Medication</u>	<u>Yes</u>	<u>No</u>
Skin irritation	Caladryl Lotion-topical	_____	_____
Open skin wound	antibiotic ointment	_____	_____
Throat irritation	throat lozenges	_____	_____
Headache	Tylenol (acetaminophen)	_____	_____
Menstrual cramps	Tylenol (acetaminophen)	_____	_____

STUDENT NAME: \_\_\_\_\_ SCHOOL YEAR: \_\_\_\_\_

GRADE: \_\_\_\_\_ has my permission to receive the above indicated medications in the health office as directed by the school physician.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHYSICIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

The Forestville Central School District does not discriminate in its employment and admission to programs and activities as applicable, on the basis of actual or perceived race, color, creed, sex, sexual orientation, national origin, religion, age, economic status, marital status, veterans' status, political affiliation, domestic victim status, use of a guide dog, hearing dog or service dog, disability, or other classifications protected under federal or state law, and provides equal access to the Boy Scouts and other designated youth groups. The designated district compliance officers will coordinate compliance with the nondiscrimination requirements of Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, as amended, the Boy Scouts of America Equal Access Act, and the New York State Human Rights Law.

The Forestville Central School District Compliance Officers are: Superintendent, 12 Water Street, Forestville, NY 14062 (716) 965-6539 MS/HS Principal, 4 Academy Street, Forestville, NY 14062 (716) 965-2711 Elem Principal, 12 Water Street, Forestville, NY 14062 (716) 965-2742 Complaints may also be filed with the Office for Civil Rights, New York Office, U.S. Department of Education, 32 Old Slip, 26th Floor, New York, NY 10005-2500, phone (646) 428-3800, fax (646)428-3843, email: [OCR.NewYork@ed.gov](mailto:OCR.NewYork@ed.gov).