

SAMPLE NOTIFICATION LETTER TO PARENTS/GUARDIANS

For Secondary Schools
(may be included in school newsletter or manual)

Dear Parents/Guardians and Students:

Re: Administration of Medication During School Hours

If a student requires prescribed medication during school hours, please notify [*insert contact name*] to provide the necessary authorization and medical information. (It is not necessary to advise the School when a student requires non-prescription medication.) In appropriate circumstances school personnel may assist with the storage and/or administration of prescribed medication.

For the protection of all students and school personnel, school personnel may confiscate unauthorized medication found in the possession of a student.

Thank you for your cooperation.

For Elementary Schools
(may be included in school newsletter or manual)

Dear Parents/Guardians:

Re: Administration of Medication During School Hours

If your child requires prescription or non-prescription medication during school hours, please notify [*insert contact name*] to provide the necessary authorization and medical information. In appropriate circumstances school personnel may assist with the storage and/or administration of medication.

For the protection of all students and school personnel, school personnel may confiscate unauthorized medication found in the possession of a student.

Thank you for your cooperation.