Maury County School
Over the Counter and Short-term Prescription Medication

Requests for school personnel to assist in administration of short-term prescription medications require that this statement be filed with the school nurse. An adult must bring all medication into the school. The medication should be in its original container, unopened, and with the child's name on it.

Student Information

To be completed by parent/guardian:

Student Name: _____
Last First Middle

Date of Birth: _____

Medication Information

Name of Medication: _____

Dosage: _____

Frequency and Time: _____

Discontinuation Date: _____

Reason for Medication: _____

Parent Information

Parent/Guardian Phone Number in case of emergency:
Home: _____ Cell: _____ Work: _____

Parent/Guardian Signature: _____ Date: _____

Office Information

Date	Time	Dosage	Signature