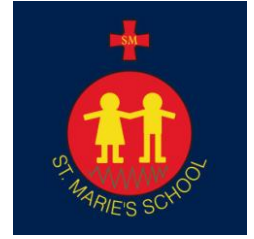


ST MARIE'S SCHOOL, A Catholic Voluntary Academy

Fulwood Road
Sheffield
S10 3DQ
Tel: 0114 2301904 Fax: 0114 2303509
Email: enquiries@stmarieslearning.co.uk
Headteacher: Mr A Dewhurst



MEDICAL FORM

The school will not give your child medicine unless you complete and sign this form, and the headteacher has agreed that school staff can administer the medication.

DETAILS OF PUPIL

SURNAME.....

FORNAME

ADDRESS M/F:

..... DATE OF BIRTH:.....

..... CLASS.....

Condition of illness:

MEDICATION

Name/Type of Medication (As described on the container)

For how long will your child take this medication:

Date dispensed:

FULL DIRECTIONS FOR USE:

Dosage and method:

Timing:

Special Precautions:

Side Effects:

Self Administration:

Procedures to take in an Emergency

I understand that I must deliver the medicine personally to one of the teaching assistants in either KS1 or KS2 and accept that this is a service which the school is not obliged to undertake.

Date.....Signature.....

Mission Statement: Each pupil has a divine beginning and an eternal destiny:- We help her/him on that journey

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Registered office at St Marie's School, Fulwood Road, Sheffield S10 3DQ

