

**WESTAMPTON TOWNSHIP PUBLIC SCHOOLS
HOLLY HILLS SCHOOL
500 Ogden Drive Westampton, NJ 08060
Phone (609) 267-8565 Fax (609) 702-9744**

PERMISSION TO ADMINISTER MEDICATION IN SCHOOL

NAME: _____

GRADE: _____ **TEACHER:** _____

MEDICATION: _____

DOSAGE: _____

REASON FOR ADMINISTRATION: _____

**DATES
REQUIRED:** _____

**SPECIAL
INSTRUCTIONS:** _____

GIVE ON ½ DAYS: YES _____ **NO** _____

WITHHOLD FOR FIELD TRIPS: YES _____ **NO** _____

**PHYSICIAN'S
SIGNATURE:** _____

**SIGNATURE OF
PARENT/GUARDIAN** _____