**LANSVALE PUBLIC SCHOOL | 37-45 Chancery Street | Canley Vale NSW 2166**

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<https://www.lansvale-ps.nsw.edu.au/>

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**REQUEST FOR ADMINISTERING MEDICATION TO STUDENTS**

|  |
| --- |
| **Student Details**  |
| Child’s full name    | Class  |
| Medical condition    | Medication  |
| Days or dates to be administered    | Time to be administered  |
| Prescribed dosage    | Expiry date of the medication  |
| Special storage requirements (eg: store in refrigerator)    | Special instructions for administering (eg: must be taken with food)   |
|  Doctor’s name/medical centre:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Doctor’s address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Doctor’s phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |
| Are there any likely side effects : Yes □ No □  |
| If yes please specify:  |
| If your child administers his or her own medication at home do you request that he or she self administers this medication at school? Note: The Principal needs to approve a decision for a student to self administer Yes □ No □  |
| **In the case of students carrying their own asthma reliever or epipen, please complete additional form**  |
| **Parent or Carer contact details**  |
| Name    | Phone  |
| Parent or carer signature    | Date  |

**Privacy notice**

The information requested on the form is essential for assisting the school to plan for the support of your child’s health needs. It will be used by the NSW Department of Education and Communities for the development of arrangements with you to support your child’s health needs. Provision of this information is voluntary. If you do not provide all or any of this information, the school’s capacity to support your child’s health needs could be impaired. In general, schools do not administer medication which has not been specifically requested by a medical practitioner for an individual student for a specific condition. Schools follow the same procedure for non-prescription medications and natural remedies. This information will be stored securely. You may correct any personal information provided at any time by contacting the Principal.

October 2021

**OFFICE USE ONLY**

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