



Procedures for Dispensing Prescription Medication

1. Medication must be brought by a parent/guardian in a labeled prescription bottle. This will be stored in the nurse's office/or front office for dispensing.
2. A Medication Authorization Form must be filled out and signed by the parent/guardian and will be kept on file in the office. If at any time the dosage or time changes, a new form must be filled out.
3. Medication not picked up by the end of the school year will be disposed of.

Medication Authorization Form

Name of medication: _____

Reason for medication: _____

Dosage: _____



MEDICINE

Time to dispense: _____

I authorize North Georgia Christian Academy to dispense medication to my child,
_____, in the amount and time stated above. I will notify the
school and update this form with any changes in medication or in the event the medication is
discontinued.

Date

Parent signature