

**Hillcrest Christian School
17531 Rinaldi Street
Granada Hills, CA 91344-3399**

**REQUEST FOR MEDICATION TO BE TAKEN DURING SCHOOL HOURS
(To be completed by a licensed physician)**

California Education Code Section, 42423 allows the School Board of Hillcrest Christian School to provide that the principal or his/her designee may assist in carrying out a physician's recommendations with respect to any pupil who is required to take medication during the regular school day. The staff recognizes the desirability of following a physician's recommendations as nearly as possible at school. The fact that this is a service or accommodation that the school is not legally required to perform is recognized by all parties signing this form, and in so signing they agree to hold the school or its personnel free from any or all claims, demands, or suits which might arise out of these arrangements.

Last Name of Pupil First name Sex Date of Birth School

Purpose of Medication Name of Medication

Dosage Prescribed Time Schedule Dose Form (tablet, liquid, etc.)

Date of Prescription Length of Time This Medication Will Be Necessary

Precautions, Special Instructions, Possible Adverse Effects, Comments: _____

The pupil for whom this medication is prescribed is under my care.

Print Name of Physician Signature of Physician

Address Phone Date

I request that my child, _____, be assisted in taking the above prescribed medication at school by an authorized person, and will comply with the school's policies and procedures. This is to certify that I have read the physician's recommendations and approve the medicine and medication as set forth herein and request that school personnel assist my child in matters detailed herein. Further, I hereby agree to hold harmless and indemnify the School Board and employees from all claims, damages, or expenses arising out of any injury or death of any person, or damage to property which may result from administering said medication or from any harmful effects of same.

Date Phone Signature of Parent or Guardian

Please note: All prescription medication must be in the original container with the printed directions on the label. Non-prescription medications will not be given at any time without a written authorization and instruction from the child's physician.