



**REQUEST FOR MEDICATION**

Student's Name \_\_\_\_\_

Grade / Teacher / Homeroom \_\_\_\_\_

Administration of medication in school should be avoided whenever possible. However, when a student's attendance is contingent upon medication during school hours, a physician may request that it be administered by the school nurse. Please have your physician complete Section I below. This will allow the school nurse to dispense medication to your child during school hours.

The medication (in the original pharmacy container and labeled according to standards) must be delivered to the school nurse by a parent / guardian and must be accompanied by this form. A *Request for Medication* is required for each form of medication.

**Section I (To be completed by Physician / Health Care Provider)**

I request that \_\_\_\_\_ be administered medication as prescribed.

Diagnosis:				Name of Medication:		
Route:		Dosage:		How often:		
Specific time to be given:		Date to begin:		End date:		
Side Effect(s):						

Physician / Health Care Provider Signature \_\_\_\_\_

Date \_\_\_\_\_

Physician / Health Care Provider Stamp \_\_\_\_\_

**Section II (To be completed by Parent / Guardian)**

I request that the School Nurse administer this medication to my child as prescribed.  
I agree to deliver the medication to the School Nurse in the original container labeled by the pharmacy or physician.

Parent / Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**Questions for the School Nurse?**

**SES** – Ilene Addonizio, RN, CSN & Melissa Young, RN & CSN – Phone: 609-632-0960 (5015) / Fax: 609-259-3860

**PRMS** – Ginny King, RN, CSN & Gail Cipolloni – Phone: 609-632-0940 (4011) / Fax: 609-918-9011

**RHS** –Jennifer Lipschutz RN, CSN & Joanne McMichael, RN, CSN – Phone: 609-632-0950 (3164) / Fax: 609-371-7961

*Sharon Elementary School*  
234 Sharon Road  
Robbinsville, NJ 08691  
609-632-0960 / Fax: 609-259-7506  
Grades K-4

*Pond Road Middle School*  
150 Pond Road  
Robbinsville, NJ 08691  
609-632-0940 / Fax: 609-918-9011  
Grades 5-8

*Robbinsville High School*  
155 Robbinsville Edinburg Road  
Robbinsville, NJ 08691  
609-632-0950 / Fax: 609-371-7961  
Grades 9-12