



# St. Louis King of France Catholic School

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[www.slkfschool.com](http://www.slkfschool.com)

**Pamela K. Schott, Principal**

**Reverend Mark Raphael, Ph.D., Pastor**

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Dear Parents,

The following form is required if you plan to leave a bottle of medicine in my office. Common medications that are left in my office include Tylenol, Motrin, Orajel, etc. Any medications brought to school must arrive in its unopened, original container. The medicine must be clearly labeled with your child's name. Medications cannot be shared between children.

Please be aware that medications can only be given when we have written permission from a doctor explaining why the medicine will be given. (ex. teething, recent immunization shots) Fever cannot be treated if the source of the fever is not clearly identified.

The following form is not for use with occasional medications prescribed by doctors, such as antibiotics for ear infections, breathing treatments, etc. Please request a separate form for these types of medications.

If you choose not to leave any medications at school, you may disregard the following form.

No teacher will administer medication to a child without calling a parent first.

All my best,

*Stacie F. Bourgeois*

Stacie Bourgeois  
Director of Early Childhood Education

**Medication Authorization Form**  
**Medicine Must Be In Its ORIGINAL CONTAINER**

Child's Name: \_\_\_\_\_

Medication Name: \_\_\_\_\_

Dosage Amount/Frequency: \_\_\_\_\_

How to be Given: Oral    Topical    Other: \_\_\_\_\_

Time(s) to be Given: \_\_\_\_\_

Date(s) to be Given: \_\_\_\_\_

Side Effects/Anticipated Reactions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special Instructions (if applicable): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Date

**If all information is not filled in completely, medication will not be given.**

Administration Documentation

Date Given	Time Given	Dosage Given	Signature of Person Administering Medication

Signature of Staff Completing Form \_\_\_\_\_

Maintenance medication authorization shall be updated as changes occur or at least every six months.