

Mrs. Raeanne Abramovich, Counselor

Phone: 330-876-2840

Fax: 330-876-2841

## JOSEPH BADGER SCHOOL DISTRICT

7119 State Route 7 Kinsman, Ohio 44428 **School Clinic:** phone 330-876-2803 fax 330-876-2861

## **AUTHORIZATION FOR OVER THE COUNTER MEDICATION**

The following information is necessary for any student to use Over the Counter medications or to receive treatment in school. All spaces must be completed.

Student Name:		Parent/Guardia	Parent/Guardian Name (print):	
Address	5:	Emergency Phor	ne Number:	
Date of birth:		Grade/Teacher:		
I am requesting permission for the above student to: (check one)				
	use or receive medication			
	receive treatment			
2.	Name of medication:			
3.	3. Dosage and Frequency: (I understand that the medication recommended dosage on the box/container will be reviewed and compared to parent/guardian request. If the dosage exceeds amount recommended on the box/container, it must be requested by a physician's order on a Prescribed Medication Form.)			
4.	I will personally be responsible for safe delivery of the medication to the school, for maintaining adequate amounts of medication, and replacing it prior to its expiration date.			
5.	5. I will provide the school with a new authorization form if there is any change in the dosage or use of the medication and I will notify the school in writing if I want the medication to be discontinued. I understand that verbal notification is permissible followed by written documentation by the next school day. Faxing the appropriate notification is also acceptable.			
6.	i. I release and agree to hold the Board of Education, its officials and its employees harmless for any and all liability for damages or injury resulting directly or indirectly from this authorization.			
previo		-	on will not be sent home with the child unless a not retrieved will be disposed of according	
Signature of Parent/Guardian		Relationship to Stud	ent Date	
BADGER HIGH SCHOOL 9-12 Mr. Steven Kochemba, Principal		BADGER MIDDLE SCHOOL 5-8 Mr. Bill Hamilton, Principal	BADGER ELEMENTARY K-4 Dr. Mary Jefferson-Gough, Principal	

Mrs. Andrea Steiner, Counselor

330-876-2841

Phone: 330-876-2840

Fax:

Mrs. Andrea Steiner, Counselor

Phone: 330-876-2860

Fax: 330-876-2861