

# New Life Community Church - Connecting Kids Program

## **REQUEST FOR ASSISTANCE WITH MEDICATION – BEFORE OR AFTER SCHOOL OR DAY CAMP**

The Connecting Kids program requires that all children who need medication given before or after school or during Day Camp must do the following:

1. Present a written statement from the child's physician detailing the method, amount and time schedules for taking the medication.
2. Present a written statement from the student's parents/guardian requesting the Connecting Kids program to assist the child in taking the prescribed medication.
3. Bring the medication in the original bottle or package, properly labeled.

**Children may not carry medications on their persons or keep it in their backpacks.**

### **TO BE COMPLETED BY PARENT**

\_\_\_\_\_  
Last Name of Child

\_\_\_\_\_  
First Name of Child

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Date of Birth

I request that designated Connecting Kids staff members assist my child in taking the medication in accordance with the instructions provided below by the physician. I authorize Connecting Kids to communicate with the physician below regarding my child's medical condition and/or the medication prescribed for it.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone

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

### **TO BE COMPLETED BY A LICENSED PHYSICIAN**

\_\_\_\_\_  
Purpose of Medication

\_\_\_\_\_  
Name of Medication

\_\_\_\_\_  
Dosage Prescribed

\_\_\_\_\_  
Time Schedule

\_\_\_\_\_  
Dose Form (tablet, liquid, etc)

\_\_\_\_\_  
Date of Prescription

\_\_\_\_\_  
Length of Time to be Taken

\_\_\_\_\_  
Method of Administration

DESCRIBE PRECAUTIONS, SPECIAL INSTRUCTIONS, POSSIBLE ADVERSE SIDE EFFECTS, OR OTHER COMMENTS (*PLEASE INCLUDE STORAGE INSTRUCTIONS*):

\_\_\_\_\_  
The above named child for whom medication is prescribed is under my care.

\_\_\_\_\_  
Print or Type Name of Physician

\_\_\_\_\_  
Signature of Physician

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date

**THIS REQUEST EXPIRES AT THE END OF THE SCHOOL YEAR FOR THE BEFORE AND AFTER PROGRAM OR THE END OF THE SUMMER FOR THE SUMMER DAY CAMP PROGRAM IN WHICH IT WAS MADE.**