



## Springfield Primary School

St. Mark's Road, St. Saviour, Jersey JE2 7LD

School Tel: (01534) 759657

Fax: (01534) 625567

Nursery Tel: (01534) 871976

Email: [admin@springfield.sch.je](mailto:admin@springfield.sch.je)

[www.springfield.sch.je](http://www.springfield.sch.je)

Headteacher: Mr. Mal Robson, B.Sc. QTS (Hons)

Dear Parent/Carer,

### **PRESCRIBED MEDICATION**

If your child is prescribed medication (e.g. antibiotics) which must be administered **4 times a day**, please complete the form below and hand it the School Office with the medication. (Children are not allowed to bring any medication into school or administer any medication themselves). **The school cannot administer any medication without this completed form.**

If your child is prescribed medication to be given **3 times a day** the school **will not** undertake this. (The medication can be given before school, after school and evening). However, should you wish your child to receive a dosage at lunch-time a parent/carers is welcome to come into school to administer this independently at any time during the course of the day.

Yours sincerely,

*Mr M Robson*  
Headteacher

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### **PRESCRIBED MEDICATION (SHORT-TERM)**

**All containers for medication will be labelled separately by the school**

**PLEASE COMPLETE AND RETURN TO THE SCHOOL OFFICE WITH YOUR CHILD'S MEDICATION**

**Pupil's Name:**

**Reason for Medication:**

**Name of Medication:**

**Dosage to be given at School (e.g. one 5ml spoonful):**

**Times to be given at School:**

**I give permission for my child to be given the above medication during school hours.**

**Signed ..... Date .....**