

Medication Self-Carry Agreement

Student Name:	 Birthdate:	
Grade/Teacher		

Monroe Public schools Medication Policy allows students to carry and self-administer medication if the following criteria are met:

- Prescription medications also require a medication authorization form and must have a physician's permission to self-carry and signature.
- A Self-carry agreement form signed and dated by the parent indicating the name of medication, dosage, date(s), and times(s) taken.
- A one day supply of medication
- Medication is in the original container
 - □ Prescription- labels must specify the name of student, name of
 - medication, dosage, route and frequency or time of administration
 - □ Non-prescription- medication must have the student's name written on the original container.
 - □ Check to see it is current or unexpired
- A student may be allowed to carry emergency medication if authorized by a physician, parent, school nurse and principal.
- Violations of any conditions placed on the student carrying and self
- administering medication may result in termination of that permission.

Permission and forms are good for the current school year only.

Medication:		Dose:	Reason for	
taking medication:				
Time:	Dates:		_Current school	year
Parent Signature:			_ Date:	School
Nurse Signature		Date [.]		

After meeting with the School Nurse, student will understand that:

- All emergency medication must be brought on all field trips and while participating in, before and/or after, school activities
- If symptoms are not relieved in 15 minutes, student will notify staff and proceed with an escort to the health room.
- If medication is lost at school, student will notify the health room immediately.
- Sharing or borrowing of medication with another student is strictly prohibited.

Student Signature:	Date:
School Nurse Signature:	Date:
Principal/Designee Signature:	Date:

*Permission to self carry is subject to principal approval per board policy Health Service 3-1--2023