



*A Catholic School  
of Academic Excellence*  
370-3817

## Notre Dame-Bishop Gibbons School

2600 Albany Street · Schenectady, NY 12304-1899 · (518) 393-3131 · Fax (518)

### **Self Carry and Self Administer of Medication:**

1. To be completed by the parent or legal guardian:

I consent that my child \_\_\_\_\_ grade \_\_\_\_\_ can self carry and self administer the medication as prescribed by a licensed health care provider. An adult will supervise my child taking his/her own medication (if self carry and self administer order are on file).

Print Name ( Parent or guardian): \_\_\_\_\_

Signature ( Parent or guardian): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Date: \_\_\_\_\_

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_

Route of medication: \_\_\_\_\_ Frequency : \_\_\_\_\_

2. The school requires a physician order that specifies that the student can self-carry and self-administer the medication. We need the name of the student, the name of the medication, the dose of the medication, frequency of administration, and route of administration.

*Accredited by the Board of Regents of the University of the State of New York  
And the AdvancED North Central Association Commission on Accreditation and School Improvement  
(NCA CASI)*

