



# Gaelscoil Riada

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## Polasaí Riaracháin Cógais

### *Request to authorise a member of staff to administer medicine*

I/ We, the parents/guardians of \_\_\_\_\_, request the Board of Management of Gaelscoil Riada to authorise a member of staff to administer medication to my/our child.

Enclosed is a letter providing the following information:

1. Child's personal details
2. Details of the condition & name of medication
3. Symptoms of the condition and circumstances under which the medication is to be given
4. Arrangements for the administration of medicines- to include measures such as self- administration, administration under parental supervision or administration by school staff.
5. Procedures to be followed in the administration of the medication (see Appendix 3)
6. Procedures to be followed in the storing of the medication
7. Expiry date of Medicine and procedures for collection/disposal of medicines

Following confirmation of any change in medical condition, I/we will inform the Principal/Deputy Principal (in the absence of the Principal) and the Board of Management in writing if there is any alteration in the administration of medicines or emergency procedures.

I/ We indemnify the Board of Management and its agents from and against all claims that could arise from the administration or failure to administer the said medicines. (see appendix 1)

Signed \_\_\_\_\_  
Parent/ Guardian

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

Signed \_\_\_\_\_  
Parent/ Guardian

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