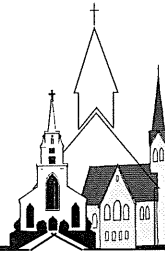


**ST. CROIX CATHOLIC FAITH FORMATION**  
*Serving the Catholic Churches of*  
*Saint Charles, Saint Mary and Saint Michael*



**218 E. Willard Street**  
**Stillwater, Minnesota 55082**  
**651-351-3175**

**REQUEST TO ADMINISTER MEDICATION—DR. & PARENT PERMISSION FORM**

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

The policy of the St. Croix Catholic Faith Formation Program, regarding the dispensation of medication in school is that medication shall be administered only when the student's health requires medication be given during school hours.

Minnesota State Law (M.S. 126.201) required medications which are administered at school must be in a container or prescription bottle properly labeled by a pharmacist or physician. Pharmacists should be asked to divide the medication between two containers completely labeled, one for home and one for school.

St. Croix Catholic Faith Formation's policy on medication requires a written order from a physician and authorization from parent/guardian for the school to administer medication. Medications will be kept in a locked cabinet in the office and be administered by the Director or supervised designee.

Sincerely,  
Eileen Douglass  
Director of Faith Formation

**NOTE:** For the St. Croix Catholic Faith Formation Program to safely administer medication, the following information should be provided by the physician and parent/guardian and returned to Mr. Klein.

\_\_\_\_\_ is to receive \_\_\_\_\_  
PATIENT'S NAME MEDICATION AND DOSAGE

At \_\_\_\_\_ for the treatment of \_\_\_\_\_  
TIME

Possible side effects: \_\_\_\_\_

Estimated date of termination: \_\_\_\_\_

\_\_\_\_\_, M.D. \_\_\_\_\_  
PHYSICIAN'S SIGNATURE ADDRESS PHONE

I hereby authorize the Program Coordinator designated school personnel to administer the above medication and thereby release program personnel from liability should reactions result from the medication.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## MEDICATIONS

Diagnosis and treatment of illness and the prescribing of drugs and medications are never the responsibility of a school and should not be practiced by any school personnel.

It is the expectation of the SCCFF program that all students' medications be administered by a parent at home. If, under exceptional circumstances, a student's health would be jeopardized by not taking the medication during school hours and the parent cannot be at school to administer the medication, the Coordinator or designated person(s) shall administer the medication in compliance with appropriate administrative rules, which follow.

When medication is to be administered by the Coordinator or designee during school hours:

1. Written instructions signed by parent and physician shall be required and shall include:
  - a. Student's name
  - b. Name of medication
  - c. Purpose of medication
  - d. Time(s) to be administered
  - e. Dosage
  - f. Possible side effects
  - g. Termination date for administering the medication
2. The medication must be supplied in a prescription bottle or container properly labeled by a pharmacist or physician.
3. The Coordinator or designee, shall:
  - a. Inform appropriate school personnel of the medication.
  - b. Administer the medication per physician's orders.
  - c. Keep medication in a locked cabinet.
  - d. Medication not used or picked up will be disposed of after the month of May each year.
4. The parents of the student shall assume responsibility for informing the Coordinator of any change in the student's health or change in medication.