



St Michael & All Angels

Catholic Primary School

New Hey Road, Upton, Wirral, CH49 5LE

Headteacher: Mrs S Ralph

Twitter: @smaaaweb, @smaaanews

Tel 0151 677 4088

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Absence Line 07592020601

www.smaaawirral.com

Request for child to carry his/her medicine

THIS FORM MUST BE COMPLETED BY PARENTS/GUARDIAN

If staff have any concerns discuss request with healthcare professionals

Name of school

St Michael and All Angels Catholic Primary

Name of child

Date medicine provided by parent

/ /

Class

Name of medicine

Procedures to be taken in an emergency

Contact Information

Name

Daytime telephone number

Relationship to child

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Date _____

Signed _____ PRINT NAME _____

If more than one medicine is to be given a separate form should be completed for each one

[Type here]