Growing in GRACE II
License Number C05HE0131
2987 Commercial Way Spring Hill FL 34606
P: 352-515-5612 F: 352-515-5615
Amanda Wagoner, Director—Kati Koelpin, Director Apprentice

Authorization for Prescription Medication

- No medication, lotions, creams, or ointments shall be given by child care personnel without the signed permission of the parent or legal guardian. All medication must be in the original container with the child's name, name of the physician, medication name, and medication direction written on the label.
- Growing in GRACE II has made the choice not to administer non-prescription medication. Parent are welcome to come in the center and give medication to children
- Medication can be administered for up to 10 days before new signed permission must be given.
- Medication which is expired or is no longer being administered shall be returned to the parents or legal guardian.
- All medications must be given to teacher or office personnel to ensure the safety of all children

_____ _____

Child's Name Age

_____ _____ _____

Name of medication Amount to be given Time(s) to be given

I hereby give Growing in GRACE II permission to dispense the medication listed above in accordance with written directions on the prescription label.

_____ _____ _____

Parent Signature Date permission given Date new permission is needed

Record of medication given

Date/Time	Amount Given	Employee Signature

This authorization form must be kept with medication while being dispensed and then kept in child's file for at least 4 months' post