



## Confirmation of Headteacher's agreement to administer medicine

Is it agreed that

Name of Child

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Will receive

Quantity and name of medicine

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Every day at

Time medicine to be administered  
(Eg lunchtime

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Name of Child

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Will be given/supervised whilst he/she takes their medication by admin or TA staff

This agreement will continue until the end of the course of medicine or until instructed by parents.

Head Teacher signature

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Print Name

Mr Allan Lowe

Date

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