

Name of Child		Age	
LearnStar Location enro	olled in		
Name of Medication			
Child's Physician Name Physician'			none Number
Does medication ne	ed to be refriger	rated? Yes	_ No
Medication must be in orig LearnStar personnel only physician.	ginal container with the /. We can only dispen	e prescription label still se medication as is de	ntact. This medication will be dispensed by scribed on the label in writing from the child's
AMOUNT		Tar staffcan dispense an	NUMBER OF DAYS  nymedication. Parent/Guardian's consent for
LearnStar staff to adminis			
I give permission for the	e LearnStar to admir	nister the above med	cation to my son/daughter.
Parent/Guardian Signat	ure	Date	
LearnStar Leader Signature		Date	
Time given:		Date: Given	by: Staff Signature
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