



**"An Independent Christian School Ministry Serving the Cape Fear Region"**  
1422 Ireland Dr • Fayetteville, NC 28304 • (910) 483-3905 Office • (910) 483-6966 • www.fayettevillechristian.com

## Permission to Administer Medication

### Prescription Medication

All prescription medication must be labeled with the student's name. These medications **must** be given and kept with the school office.

### Over the Counter Medication

We are not able to administer over the counter medication, unless we have permission from the parent or guardian. If you would like to keep Tylenol, Motrin, Cough Drops, etc. in the office please send the medication in with the below signed and the appropriate dosage that is to be administered.

Note: If the medication is in liquid form, a dosage cup or measuring tool must be provided.

*This signed release form from the parent or guardian authorizes FCS to administer the prescription medication or over the counter medication and must be on file in the School Office.*

Student's Name : \_\_\_\_\_

Grade: \_\_\_\_\_

Name of Medication: \_\_\_\_\_

Dosage: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

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

Daytime Telephone Number: \_\_\_\_\_