



Field Trips Medication Permission Form
School Year 2019-2020

Student's
Name _____

Date of Birth _____ Grade _____

Name of Medication _____

I give permission for a BCCS teacher or BCCS staff member to administer medication to my child while they are away from school on a field trip.

If your child receives medication during school hours it will be packaged and labeled by the school nurse and given to their teacher.

For overnight field trips: any other medication not taken during school hours should be packaged in its original bottle with the following information:

1. Student's name
2. Name of medication
3. Dosage
4. Route
5. Time to be given

PARENT/GUARDIAN SIGNATURE

DATE

Reimagining What a School Can Be