

# South Shore Educational Collaborative

75 Abington Street  
Hingham, MA 02043  
www.ssec.org



Nursing: 339-201-4557  
Fax: 339-201-4583  
E-mail: pallen@ssec.org

---

## AUTHORIZATION FOR DISPENSING MEDICATION IN SCHOOL PRESCRIPTION AND OVER THE COUNTER MEDICATIONS

### PARENT/GUARDIAN

I hereby request that my child \_\_\_\_\_ Grade \_\_\_\_\_

Receive the following medication: \_\_\_\_\_

Prescriber's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### PHYSICIAN

I request that my patient receive the following medication(s) during school: \_\_\_\_\_

Name of Student \_\_\_\_\_ Diagnosis \_\_\_\_\_

Reason for Medication \_\_\_\_\_

Prescribed Dosage \_\_\_\_\_

Time to be taken during school \_\_\_\_\_

For PRN medication please indicate how often to administer \_\_\_\_\_

Other medications being taken by the student \_\_\_\_\_

Possible side effects and adverse reactions \_\_\_\_\_

Prescriber's Signature \_\_\_\_\_ Date \_\_\_\_\_

Prescription end date: \_\_\_\_\_ (by 6/30 of school year unless otherwise specified)

Rev 5/7/21 PA

---

The South Shore Educational Collaborative serves Braintree, Cohasset, Hingham, Hull, Marshfield, Milton, Norwell, Quincy, Randolph, Scituate, Weymouth and Whitman Hanson R.S.D.