



# Shore Regional High School District

Monmouth Beach – Oceanport – Sea Bright – West Long Branch

132 Monmouth Park Highway

Patricia Smith, RN  
School Nurse

West Long Branch, New Jersey 07764-1396

Telephone: 732-222-9300, ext. 2500

Email: psmith@shoreregional.org

## **PARENT/GUARDIAN PERMISSION FOR MEDICATION ADMINISTRATION**

***(Auto-Injector, Inhaler - May be Self Administered)***

***(Glucagon - not Self Administered)***

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

Birth Date: \_\_\_\_\_ Grade: \_\_\_\_\_

Medication: \_\_\_\_\_ Dose: \_\_\_\_\_

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

- My child has a condition that may require the immediate use of a prescribed medication when the symptoms of a condition develop, my personal physician and myself certify that he/she is capable of self-administration. I give permission for my child to carry his/her medication on his/her person and to self administer it when necessary. I acknowledge that the Shore Regional High School District shall incur no liability and I indemnify and hold harmless the district and its employees or agents against any claims arising as a result of any injury arising from the self-administration of medication by this student.
- I authorize the school nurse, substitute school nurse, or medical inspector to administer the above medication to my child and release and indemnify these persons and the school district from any liability in connection with administration of this medication.

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