

Medication Form

(As Required)

Child Care Regulation 27(1) requires every licensee who agrees to administer medication to a child to: (a) obtain prior written authorization to administer the medication from the child's parent; and (b) ensure written records of each dose of medication administered to a child are maintained.

Medication Authorization

* A separate form must be completed for each type of medication administered.

Child's Name: _____

Name of Medication: _____

Dosage: _____

Times of day to be administered: , ,

Child care centre or child care home provider name: _____

I hereby authorize staff of the above named child care centre or child care home to administer the above named medication in the dosage and the times of day indicated to the above named child.

Note: Personal health information may be disclosed by the facility to the Ministry of Education in the course of reviewing the facility's record keeping obligations.

Date: ____/____/____
Year Month Day

Signature of parent/guardian

Medication Record

To use this medication record, list the dates down the left hand column and indicate the times of day that the medication was administered. The person who administers the child's medication must place his/her initials in the appropriate box.

Date Year/Month/Day	Times Administered						Comments
	Time	Initials	Time	Initials	Time	Initials	

Date Year/Month/Day	Times Administered						Comments
	Time	Initials	Time	Initials	Time	Initials	

Medication Termination

Medication has been terminated on: ____/____/____
Year Month Day

 Signature of parent/guardian

 Signature of child care centre supervisor/child care provider

This form must be retained on file at the child care centre or the child care home for the period of time as outlined in Section 36 of *The Child Care Regulations, 2015*.