OGDEN CITY SCHOOL DISTRICT

REQUEST FOR PARENT/GUARDIAN TO PICK UP MEDICATION

To the Parent/Guardian of ________________________________

As the end of the school year is approaching, we want to remind you to arrange to pick up your child’s medication at school. The medication cannot be sent home with your child or a sibling.

Please pick up your child’s medication prior to _________________ at the school office. Medications left at the school after two (2) weeks from the above date will be disposed of per Ogden City School District policy.

When picking up your child’s medication, please pick up a new Authorization of School Personnel to Administer Medications form to be filled out for the coming school year (if your child will need medication during school hours). As a reminder, each medication needs a separate form and must be reauthorized each school year.

Thank you for your cooperation.