Medication Administration Permission for Over-the-Counter Topical Medications

Parent/guardian must authorize staff to apply over-the-counter topical ointments, insect repellents, lotions, and creams. Sunscreen and lotion are examples. Mishkah Montessori can only accept items in their original containers and clearly labeled with your child's name. **We cannot accept aerosol containers, including aerosol sunscreen or bug repellent**. We must keep all insect repellents in locked storage and all other items out of reach of students when not in use.

Child's Name:

_____

Permission is given to apply the following (name/type):

_____

Amount: _____ **Expiration date, if applicable:**_____

Where to apply the ointment, repellent, lotion or cream:

☐ all exposed skin ☐ face only ☐ other (specify): _____

When to apply the ointment, repellent, lotion or cream:

☐ before going outside ☐ other/as needed for (specify):

I give permission to my child care provider to apply the medication listed above as instructed.

_____ _____ _____

Parent/Guardian Name | Parent/Guardian Signature | Date

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