

Jefferson County Public Schools
2011-2012

Medication Disposition Notice
Important – Please Read Immediately

Student: _____ Date: _____

Medication(s): _____

- Your child's supply of medication is:
 - running low
 - depleted, needs a refill
 - expiring soon
 - medication needs to be picked up for end of school year by _____

- Your child's medication was not given on _____ because:
Date

Reason Medication Not Given

Comments

- Incomplete (student spit out, vomited, etc.) _____
- Student refused to take medication _____
- Expired Medication: _____
- Medication was not in its original container and/or labeled appropriately by a pharmacy or physician. Your pharmacist can supply you with a labeled pharmacy bottle.
- Other _____

If you have any questions, please contact the school office at 485-_____.

Sincerely,

Principal