



# Vestaburg Community School

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[www.vcs-k12.net](http://www.vcs-k12.net)

Dear Parents,

The administration and staff of Vestaburg Community School is committed to providing your children with a safe environment for learning. For our students' benefit we actively participate in the Safe and Drug Free Schools program. We also endeavor to meet the Department of Education's guidelines. Subsequently, when it comes to medications of any kind – *over-the-counter or prescription* – for everyone's sake, we've got to "Just say no!"

If your child must take medication during the day, please ask the doctor to prescribe something that can be dispensed outside of school hours. If, however, your child **must** take medication during school hours, please observe the following guidelines:

1. A Medication Authorization Form must be completed by a physician and parent/guardian for all medications to be dispensed at school.
2. Medication should be brought to school by the parent/guardian unless other safe arrangements are necessary and possible.
3. All medication must be kept in a labeled container as prepared by a pharmacy, physician, or pharmaceutical company, and labeled with dosage and frequency of administration. This language also pertains to refills. Please ask your pharmacist for a duplicate bottle whenever you have prescriptions filled so you can have one bottle at home, and one for the school.

The school will be responsible for. . .

1. storing the medication in a safe location with limited access.
2. dispensing the medication
3. maintaining appropriate records, including a daily log indicating the name of the student, name of the medication, dosage, and time given.

We cannot stock medications on the school premises. This includes non-prescription medications such as pain relievers, eye drops, and first aid cream. We will not dispense pain relievers for minor, everyday aches and pains. If your child has a medical condition (i.e. migraine headaches) requiring medication, please provide us with a Medication Authorization Form completed by your child's physician, and the medication, labeled with your child's name and dosage information.

The above plan was implemented with your child's wellbeing and safety in mind. We will appreciate your understanding and cooperation.

Sincerely,

Brandon Hubbard  
Superintendent

