First Steps Kindergarten (Poynton)
Yewtree Lane
Poynton
Cheshire
SK12 1PU

Telephone (01625) 859 867
Website: http://www.poynton-nursery.co.uk

ADMINISTRATION OF MEDICINE FORM

Child's Name - _____

Medicine - _____

Reason for medicine - _____

Prescribed by - Doctor/ Dentist/Nurse/Pharmacist (please indicate)

Dosage and time to be administrated - _____

Last dose given - _____

Duration of course - _____

How long has your child been on this medicine - _____

Signature of parent/guardian - _____

FOR NURSERY USE ONLY

Date & Time	Administered By	In the presence of	Parents Initials