IMMANUEL LUTHERAN SCHOOL
NON-PRESCRIPTION DRUG FORM

Dear Parent:

You are asked to note the following Indiana Statue:

> Indiana Code 34-4-16.5-3-5, and amendments thereto. A school administrator, designated Teacher, or other school employee designated by the school administrator, who in good faith Administers a prescription drug to a student, with the written permission of the student's Parents or guardian, and in compliance with the written instructions of a practitioner, which Shall be on file with the school, is not liable for civil damages as a result of the administration Except for an act or omission amounting to gross negligence or willful and wanton misconduct.

You have asked us to dispense a non-prescription drug to:

_____

during the school day. We believe it is in the best interest of this child in this case to have clear and specific written directions on dosage and administration from you. Toward that end, please complete the attached form and return it to us so that we can best protect and participate in the treatment of this child.

Thank you for your cooperation.

Sincerely,

Lori Lister
Principal