

School \_\_\_\_\_ N -None Available A - Absent H - \_\_\_\_\_  
 Holiday \_\_\_\_\_ School Year \_\_\_\_\_ F - Field Trip D - Early Dismissal \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
 Parent/Guardian: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Physician:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Comments:** \_\_\_\_\_

Date: _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Med: _____	Med: _____	Med: _____	Med: _____	Med: _____	Med: _____
Mg. _____	Mg. _____	Mg. _____	Mg. _____	Mg. _____	Mg. _____
Dose: _____	Dose: _____	Dose: _____	Dose: _____	Dose: _____	Dose: _____
Time: _____	Time: _____	Time: _____	Time: _____	Time: _____	Time: _____

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
AUG																															
SEP																															
OCT																															
NOV																															
DEC																															
JAN																															
FEB																															
MAR																															
APR																															
MAY																															

Administering Personnel	Initials	Administering Personnel	Initials

Administering personnel should initial on the date they administer medication.