



IUSD HEALTH SERVICES

**OVER THE COUNTER PRODUCTS
PARENT/GUARDIAN AUTHORIZATION**

Dear Parent/Guardian,

The products listed below have been approved by the Irvine Unified School District to be administered to students during the school day. Please complete this form if you authorize the school nurse or other designated unlicensed personnel to administer these products to your child during the school day.

Please check the appropriate box below to indicate your permission for the listed products to be administered to your child.

YES	NO	MEDICATION	YES	NO	MEDICATION
		Alcohol, Isopropyl (clean/disinfect) *			Dental Wax (relieves oral irritation) **
		BZK Towelettes (cleaning) *			Non-Medicated Throat Lozenges/Hard Candy (minor throat irritation) **
		Calamine Lotion (minor skin irritations) *			Contact Lens/Saline Solution (rinsing lenses) **
		Salt Water Gargle (minor sore throat) *			Petroleum Jelly – Vaseline (chapped lips) *
		Eye Wash (flush eye) *			

*To be supplied by school

**To be supplied by parent

Student Name		Student Date of Birth	
I request that my child (named above) be assisted by authorized persons in the administration of the above listed Over the Counter products in compliance with established policies and procedures.			
Parent/Guardian Signature		Contact Phone	Date

If your child needs to take any “over the counter” medication **NOT** listed on this form, you will need to carefully follow the directions attached regarding “Parent Notification for the Administration of Medication at School” The requirement remains the same for all prescription medication to be given during the school day.

If you have any questions, please contact the IUSD Health Services office at 949-936-7520.