

Carolina Day School
1345 Hendersonville Road
Asheville, NC 28803

Dear Parent/Guardian,

We ask that you review the enclosed Medications Policies and Procedures. These policies and procedures contain important information about how and when your child may receive medication at school.

Please sign below and return to Nurse Glenn indicating you have read the enclosed information.

If you have any questions about this information, please call Nurse Glenn at 274-0757.

I have read and understand Carolina Day School's Medication Policies and Procedures.

Date

Parent/Guardian Signature

Parent/Guardian Name (please print)

Student'(s) Name(s) and Grade(s) (please print)