



HOLDINGFORD PUBLIC SCHOOLS – ISD #738  
P.O. Box 250, Holdingford, MN. 56340

Chris Swenson  
Superintendent  
320-746-2196

Angela Safran  
Secondary Principal  
320-746-4309

Jim Stang  
Elementary Principal  
320-746-4461

Garrity Gerber  
Business Manager  
320-746-4306

**PRESCRIPTION MEDICATION TO BE GIVEN AT SCHOOL: SIGNED APPROVAL**

Student \_\_\_\_\_ Date of Birth \_\_\_\_\_

Teacher / Grade \_\_\_\_\_

Medication name and dosage \_\_\_\_\_

Diagnosis or indication for medication \_\_\_\_\_

Amount of medication to be taken \_\_\_\_\_

Time(s) to be taken during school hours \_\_\_\_\_

Precautions, if any \_\_\_\_\_

**THE MEDICATION MUST BE IN THE ORIGINAL PHARMACY BOTTLE, COMPLETE WITH A LABEL DISPLAYING THE NAME AND TELEPHONE NUMBER OF THE PHARMACY, THE STUDENT’S IDENTIFICATION, THE PHYSICIAN’S NAME, THE NAME OF THE MEDICATION, AND THE TIME(S) OF DAY AND DOSAGE TO BE GIVEN.**

*The law allows any person (not necessarily a nurse) to assist in carrying out a physician’s recommendation, and the school recognizes the desirability of responding to the physician’s request. This accommodation on the part of the school is not legally required. Therefore, any person signing this form agrees to hold the school and its personnel FREE from any and all suits which might arise from these arrangements.*

\_\_\_\_\_  
Signature of parent / guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone number(s)

**Priorities**

Holdingford Schools will offer a curriculum that is relevant, up to date, and aligned with state standards.

We will offer a wide variety of electives and support students at all grade levels.

We will be fiscally responsible and maintain a strong culture of open communication.