

Glen Ellyn School District 41

Ignite passion. Inspire excellence. Imagine possibilities.



793 North Main Street, Glen Ellyn, IL 60137

Medication Authorization Form

Self-Carry and Self-Administration of Asthma Inhalers

This form is to be used solely for self-carrying and the self-administration of asthma inhalers.

A new form must be completed every school year for each medication.

To be completed by the child's parent(s)/guardian(s).

Student Name: _____ Birth Date: _____ ID: _____

Address: _____

Primary Phone: _____ Secondary Phone: _____

School: _____ School Year: _____

For students requiring self-carry and self-administration of asthma inhalers:

Is the asthma inhaler required under a qualifying plan pursuant to 105 ILCS 5/10-22.21b, amended by P.A. 101-205, eff. 1-1-20? Yes No

Parent(s)/Guardian(s) please **attach prescription label** (asthma inhaler) here:

For asthma inhalers, attach the prescription label with the name of the asthma medication, the prescribed dosage, and the time at which or circumstances under which the asthma medication is to be administered. 105 ILCS 5/22-30(b)(2)(i).

I grant permission for my child to self-carry/self-administer his or her medication required under an asthma action plan, an Individual Health Care Action Plan, and or Treatment Authorization Form, a plan pursuant to Section 504 of the federal Rehabilitation Act of 1973, or a plan pursuant to the federal Individuals with Disabilities Education Act. 105 ILCS 5/10-22.21b, amended by P.A. 101-205, eff. 1-1-20.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date: _____

PLEASE COMPLETE FOR STUDENTS WHO NEED TO CARRY AND USE ASTHMA MEDICATION

I authorize the District 41 and its employees and agents, to allow my student to self-carry and self-administer his or her asthma medication: (1) while in school, (2) while at a school-sponsored activity, (3) while under the supervision of school personnel, or (4) before or after normal school activities, such as while in before-school or after-school care on school-operated property. Illinois law requires the School District to inform parent(s)/guardian(s) that it, and its employees and agents, incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-carry and self-administration of asthma medication. 105 ILCS 5/22-30, amended by P.A.s 100-726 and 100-799, eff. 1-1-19.

Please sign and date to indicate receipt of this information, and authorization for your child to self-carry and/or self-administer his or her asthma inhaler.

Student Name: _____

ID # _____

Parent/Guardian Signature: _____

Date: _____