



Orange County Department of Education
Huntington Beach City School District
Health & Wellness Program
Over the Counter Products
Parent/Guardian Authorization Form



Dear Parent/Guardian,

The over the counter products listed below have been approved for use by the Huntington Beach City School District to be administered to students during the school day and are supplied in the school Health Offices or provided by parents. Please complete and return this form if you authorize the school nurse, health clerk, 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.

Supplied by School

Supplied by Parent

Yes	No	Medication
<input type="radio"/>	<input type="radio"/>	Alcohol, Isopropyl (clean/disinfect)
<input type="radio"/>	<input type="radio"/>	Antibacterial Ointment/Cream (minor cuts/scrapes)
<input type="radio"/>	<input type="radio"/>	Antibacterial Soaps (cleansing)
<input type="radio"/>	<input type="radio"/>	Bee Sting Swabs/Wipes (itch/pain relief)
<input type="radio"/>	<input type="radio"/>	BZK Towelettes (cleaning)
<input type="radio"/>	<input type="radio"/>	Calamine Lotion (minor skin irritations)
<input type="radio"/>	<input type="radio"/>	Eye Wash (flush eye)
<input type="radio"/>	<input type="radio"/>	Hand Lotion (Eucerin/Lubriderm-rehydrating dry skin)
<input type="radio"/>	<input type="radio"/>	Hydrogen Peroxide 3% (antiseptic)
<input type="radio"/>	<input type="radio"/>	Petroleum Jelly (lubrication)
<input type="radio"/>	<input type="radio"/>	Salt Water Gargle (minor sore throat)

Yes	No	Medication
<input type="radio"/>	<input type="radio"/>	Antacids-Regular Strength (minor indigestion)
<input type="radio"/>	<input type="radio"/>	Contact Lens/Saline Solution (rinsing lenses)
<input type="radio"/>	<input type="radio"/>	Dental Wax (relieves oral irritation)
<input type="radio"/>	<input type="radio"/>	Diapering Ointment/Cream (chafing)
<input type="radio"/>	<input type="radio"/>	Lice Treatment Shampoo (cradicate infestation)
<input type="radio"/>	<input type="radio"/>	Non-Medicated Lip Balm (chapping)
<input type="radio"/>	<input type="radio"/>	Non-Medicated Throat Lozenges/Hard Candy (throat irritation)
<input type="radio"/>	<input type="radio"/>	Perineal Wash (cleansing)
<input type="radio"/>	<input type="radio"/>	Topical Oral Anesthetic (soothe gum discomfort)

Student Name		Student Date Of Birth
<i>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.</i>		
Parent/Guardian Signature	Contact Phone	Date