

MCHS HEALTH OFFICE

Freshman Campus

1012 N. Green St.
McHenry, IL 60050
PerdueCathy@dist156.org
P: 815.363.2243



Upper Campus

4724 W. Crystal Lake Rd.
McHenry, IL 60050
ClassNicole@dist156.org
P: 815.759.5497
WinkelmanSheila@dist156.org
P: 815.759.5498

Medication Return Authorization

Complete this form for retrieval of medications being stored in the Health Office. Any medication not picked up before the end of the school year will be disposed of.

We advise that medication be picked up by a parent. If you wish to have your student bring the medication home, please sign below and have your student bring this permission to us. Students will not be given their medication without the signed permission.

Medication must be picked up at the end of the school day, since the student cannot carry medication at school. By signing this form, you are allowing permission for your child to carry their medication from the Health Office to their home and deliver the designated medication to the authorizing guardian.

Student Name

DOB

Medication

Guardian/Parent Name

Guardian/Parent Signature

Date