



<b>Meddyginiaeth / Medicine</b>	
<b>Enw / Name</b>	
<b>Dosbarth / Class</b>	
<b>Cyfeiriad / Address</b>	
<b>Salwch / illness</b>	
<b>Dyddiad / Date</b>	

#### MEDICATION DETAILS

<b>Enw'r meddyginiaeth Name of Medication.</b>	
<b>Math / Type (eg liquid, tablet)</b>	
<b>Sut i'w gymeryd / Method of administration (eg llyncu / swallowed etc)</b>	
<b>Pa mor aml / Frequency (how often, at what time)</b>	
<b>Dos / Dosage</b>	

#### DECLARATION

Deallaf fod disgwyl i mi roi'r meddyginiaeth i'r athro dosbarth a deallaf fod hyn yn wasanaeth nad oes rhaid i'r ysgol ei gynnis.  
I understand that I must give the medication to the class teacher and accept that this is a service which the school is not obliged to undertake

**Print Name:**

**Sign:**

**Date:**

**Relationship to child:**