

FIFTH JUDICIAL CIRCUIT



BUCHANAN COUNTY JUVENILE OFFICE

4702 Green Acres Road, Saint Joseph, Missouri 64506
816-271-5580 / 816-271-5587 (fax)

BUCHANAN COUNTY JUVENILE DETENTION CENTER

I am the parent/guardian of _____ . I request that my
child be administered the medication _____
_____ for his/her symptoms _____
_____ as follows:

Other instructions or comments:

Verbal authorization given by _____ (mother/father) on

_____ Date

Detention Staff Signature

Parent/Guardian Signature

Date

Date