



VIRGINIA DEPARTMENT OF  
**SOCIAL SERVICES**



**Authorization Form for  
Non-prescription Over-the-Counter Skin Products  
Licensed Child Day Centers  
VDSS Division of Licensing Programs Model Form**

**INSTRUCTIONS:**

This form must be completed by the parent/guardian to authorize the use of:

- Sunscreen
- Diaper ointment or cream
- Insect repellent
- Oral teething gel
- Antibiotic/rash cream
- Other

**Zion Christian Children's Center** \_\_\_\_\_ has my permission to apply the non-prescription  
*(Name of Provider)*

over-the-counter (OTC) skin product listed below to my child, \_\_\_\_\_  
*(Child's name)*

**Specific Product Name:** \_\_\_\_\_

**Specific Product Expiration Date:** \_\_\_\_\_

Known Adverse Reactions (if any): \_\_\_\_\_

- All OTC products must:
  - Be in the original container and, if provided by the parent, labeled with the child's name
  - Be used according to manufacturer's recommendation and instructions for application
  - Not be used beyond the expiration date of the product
- Sunscreen:
  - Must have a minimum sunburn protection factor (SPF) of 15
  - Shall be inaccessible to children under 5 yrs. & children in therapeutic or special needs programs
  - Children nine yrs. and older may self administer sunscreen if supervised
- Diaper ointment/cream and Insect repellents:
  - Shall be kept inaccessible to children
  - Record of use shall be kept that includes child's name, date, frequency of application, and any adverse reactions

This authorization is effective from: **May 27, 2025** until: **May 21, 2026**  
*(Start date)* *(End date)*

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_