

200 Church Street Landisville, PA 17538

Dear Parent / Guardian:

The State Department of Health requires school age children to have dental examinations upon entry into school, Kindergarten, Grade 1, Grade 3, and Grade 7. This exam can be completed during the school year or these grades during the 12 months prior to Kindergarten, Grade 1, Grade 3, and Grade 7.

Your family dentist can best evaluate your child's dental health and assist you in obtaining any necessary dental treatments. If your child does not see a dentist, an examination may be scheduled with the school dentist upon your request and permission (see below). Please be aware that this is a dental screening and any dental problems found during this screening will need to be addressed by your dentist and at your expense.

The information requested below is necessary to complete the School Dental Health Record by the Pennsylvania Department of Health.

Please return this form to your child's school nurse. E-mail addresses for individual building <u>nurses can be found at hempfieldsd.org/healthservices</u>. This form will not be accepted if returned to Student Services.

(Name of Student)	(Homeroom Teacher)	(Grade)
Is your child under the care of a dentist (cl	heck one)? Yes	🗌 No
Name of Dentist:		
Date of last dental exam:	_ Date of next appointm	nent:
Parent/Guardian Signature:		

Parent/Guardian Signature: _____