USD 362 Dental Screenings Dates of Screening Feb 19 - March 2, 2018
Building All Schools PVHS; PVMS; LaCygne Elementary; Parker Elem.

Dear Parent or Guardian
State law requires that all children have an annual dental screening before entering school each year. To help with this, the dental staff from the Community Health Center of Southeast Kansas will be providing FREE dental screenings for all students enrolled at your child's school. After the screenings, you will receive information on the results and any recommendations for followup with your family dentist.

During these screenings, many schools have also approved CHC/SEK dentists and hygienists to provide care that prevents tooth decay. These services include protecting the teeth with the application of a fluoride varnish or dental sealant. If your school is participating in this program, there will be a special consent attached to this form. If not, and you are interested in having these services for your child, please contact your dentist or call CHC/SEK at 1-866-396-6788 and an appointment will be made at the nearest CHC/SEK dental clinic.

Please note that there is no out-of-pocket cost to the school or the family for these services.

If you **DO NOT** want your child checked, please return this form at least three school days before the screening to your child's teacher or school principal. It will then be your responsibility to provide written proof of a dental exam sometime in the last year.
Student Name_____ Grade_____

I **do not** give permission for my child to participate in the school dental screening.

_____ _____
Signature/Parent or Guardian Date

It is possible that your child may be photographed as part of news coverage of this screening or for grant reporting purposes. If you do not want your child photographed, please sign below and return this form at least three school days before the screening to your child's teacher or school principal

Student Name_____ **may not** be photographed.

Parent/Guardian's Signature_____