



Dear Parent/Guardian:

New York State Education Law requires public schools to request a dental health certificate for each student entering **Kindergarten, 2nd, 4th, 7th, and 10th grade**, and for **new students entering the district**. In alliance with current recommendations from the American Academy of Pediatrics and the American Academy of Pediatric Dentistry, the Starpoint Central School District recommends regularly scheduled dental visits. Dental Health Certificates must be signed by a duly licensed dentist authorized to practice in New York State. **Please note: dental evaluations performed within 12 months prior to the start of the school year are considered current.** Please have your dentist complete this form and submit it to your school nurse.

Thank you for your assistance in this matter. If you have any questions, please contact Laurie Harvey RN, High School Nurse, at (716) 210-2330 FAX (716) 210-2361.

Upon request, a list is available of dentists to whom students may be referred for comprehensive dental examinations on a free or reduced cost basis.

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A comprehensive dental examination was performed on the following student:

Student's Name: _____ **D.O.B.** _____

Grade: _____ **Date of Examination:** _____

Recommendations:

- Treatment
- Preventative Home Care
- Regular Dental Visits

Follow-up scheduled: Yes No

(Signature of Dentist)

(Date)

Office Stamp/Address and Phone Number: