District Nurse & Health Team

ORAL HEALTH SCREENING
KINDERGARTEN

I understand that Oral Screenings are mandatory for students entering into Kindergarten for their first year of school in the State of Michigan.

[ ] I do not want my child to participate in the Kindergarten Oral Health Assessment with the school. I understand this assessment is at no cost.

[ ] I understand this is a State requirement and will have my student screened with our dentist and submit to the office for recording. This needs to be provided no later than October 16, 2026.

Student Name: _____
(please print)

Building: _____

_____
Parent/Guardian Signature:

Date: _____

Okemos Public Schools Health Team
stephanie.gosha@okemosk12.net
4000 Okemos Road, Okemos, Michigan 48864
Phone: 517-706-5008 Fax: 517-347-4189