



GEORGE E. PETERS

ADVENTIST SCHOOL

The Christian School that Makes a Difference

6303 Riggs Road Hyattsville, MD 20783

TEL: 301-559-6710

FAX: 301-559-6444

WEB: www.gepeters.org

Dental Health Examination Certificate

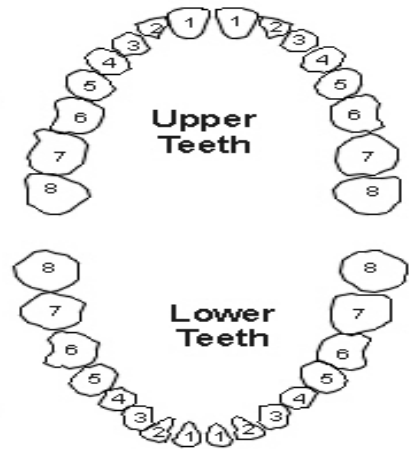
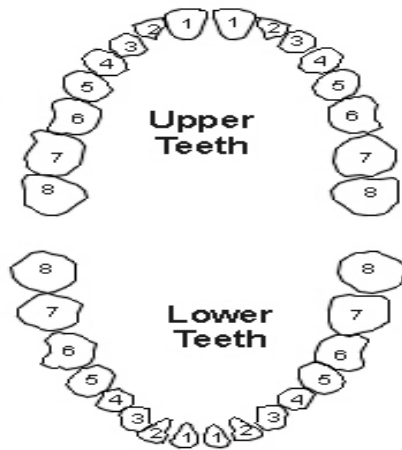
In order to maintain your child's dental health, you should provide him/her with annual dental checkups with the dentist of your choice. If you need the name of a dentist, please call southern Maryland Dental Society at 301-345-7763. Families who qualify for financial assistance may call the Department of Social service at 301-779-2177 or the Health Department at 301-386-0210.

Please have your dentist completed the certificate below and return to the above address.

STUDENT INFORMATION: (Please type or use blue or black ink)

Last Name		First Name		Middle Name	
U.S. Social Security Number		Birth Date (M/D/Y)		Place of Birth	
Country of Citizenship		City		State	
Current Address		Zip Code			

DENTAL FINDINGS:



C - Cavities **I** - Impacted **TF** - Temporary Filling **DF** - Defective Filling **X** - To be Extracted **EX** - Has been extracted

Date of Examination: _____ Requires Treatment? Yes No

Additional Remarks: _____

Wearing Braces? Yes No If Yes, plan of treatment? _____

CONTACT INFORMATION AND SIGNATURE:

Orthodontist/Dentist's Name		Office		Telephone	
Current Address/P. O. Box		City		State	
Signature		Date		Zip Code	