



Charter School for Applied Technologies

Dental Health Form

(Please return this form to school with a signature from your dentist)

This certifies that the teeth of _____ have been examined and

- ☐ have been found to be in satisfactory condition.
- ☐ are under treatment.

Signature (or stamp) of Physician

Date

Return completed form to:

Elementary School Nurse's Office
Middle School Nurse's Office
High School Nurse's Office

Phone: 716-876-7505
Phone: 716-710-3066
Phone: 716-871-7400

Fax: 716-303-7209
Fax: 716-303-7212
Fax: 716-303-7214

The Charter School for Applied Technologies prepares students to attain family-sustaining careers by integrating career exploration and a lifelong learning culture.