

## Town of Fairfield

## Fairfield, Connecticut 06824 DENTAL CLINIC APPLICATION

Public Health Nursing 100 Mona Terrace

Telephone (203) 256-3150 Fax (203) 256-3172

To: Parent/Guardian

From: Town of Fairfield Director of Health

The Town of Fairfield Health Department provides teeth cleaning and topical fluoride treatments by a dental hygienist for all students meeting income guidelines. Additionally, limited funding for eligible students is available for care by participating dentists for problems such as cavities or tooth extractions. For children with Husky or Medicaid (Title 19): The Town of Fairfield Health Department has been approved by the State of Connecticut as a Husky/Medicaid/Title 19 Provider. You MUST include your child's 9-Digit ID Number.

If you wish to apply for cleaning, fluoride treatments, or dentist services for your child, complete the information below and RETURN THIS FORM TO YOUR CHILD'S SCHOOL NURSE BY

## ALL ITEMS MUST BE COMPLETED

Child's Name:	School:	Grade/Class:
Address:	Phone #:	
Does child have a heart problem or ot work? Yes No	her medical condition requiring anti	ibiotics before dental
Check all that apply: Child has:	HUSKY Insurance # Medicaid (Title 19) # Private dental insurance None of the above	
Have you recently applied for Medica	id (Title 19) or HUSKY Insurance?	Yes No
You must provide income information of your eligibility:	and sign the permission statement	below. You will be notified
Family maximum annual adj Number is household	usted gross income \$	
I give my permission for the above-na the dental hygienist in school if he/she		and fluoride treatment by
Parent/Guardian Signature		Date:
Daytime Telephone #:		