



### Parental/Caregiver Consent Mouth Check

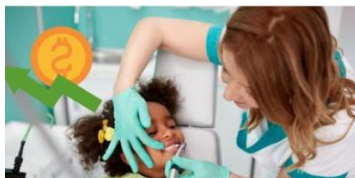
A dental care professional will be coming into school to look at your child's mouth to assess their oral health.



Should they require treatment, your child will be given a letter to take home to advise the next step.



Your child will be invited into the NHS dental practice for free dental treatment.



**School Name:** Hamstel Infant School & Nursery

**Childs Name:**

**Parent/Caregiver full name:** .....



**I give consent for my child receiving a mouth check.**

**Signature of Parent/Caregiver:**

**Date:**

.....

.....

**Mid and South Essex Integrated Care Board**

PO Box 6483, Basildon, SS14 0UG

www.midandsouthessex.ics.uk | 01268 594 350

Chair: Professor Michael Thorne CBE | CEO: Tom Abell