



THE IMMACULATE CONCEPTION SCHOOL  
A Middle States Accredited School Since 1995  
53 WINTER HILL ROAD  
TUCKAHOE, NY 10707

## DENTAL REPORT

Date \_\_\_\_\_

Student \_\_\_\_\_

School \_\_\_\_\_

Grade \_\_\_\_\_

\_\_\_\_\_ Is under care for dental treatment

\_\_\_\_\_ Has completed dental treatment

\_\_\_\_\_  
Dentist's Signature

\_\_\_\_\_  
Print Name