



CUYAHOGA COUNTY
Invest In Children



Universal Pre-Kindergarten Health Screening Requirement Acknowledgement Form

Dear Ganon Gil Parent(s)/Caretaker(s),

As part of the Universal Pre-Kindergarten program your child needs certain health screenings. These screenings may help prevent future problems with your child’s health. A few of the screenings may be offered by your child’s preschool. A list of resources is attached for those screenings that may not be provided by your child’s preschool.

Below is a list of required screenings. We are providing you with the necessary forms for your medical provider to complete in its entirety to verify test results. Please have these forms and screenings completed and returned to us within 30 days. If you are unable to get an appointment within 30 days, please notify us of when your child is scheduled to be seen.

Thank you!

- ❖ Lead screening
- ❖ Hematocrit/Hemoglobin screening
- ❖ Dental screening
- ❖ Vision screening (Offered by Ganon Gil)
- ❖ Hearing screening
- ❖ Physical (with recommended immunizations) screening

Your signature below verifies that you aware of the medical screenings your child needs; confirms that you received the necessary forms for your doctor or dentist to complete; and confirms that you received the list of local resources available to assist you with completing the medical screenings.

Parent/Caretaker

Date

Site Manager/Representative

Date

