



Student's Name (please print first then last)  
Grade in 2014-2015

Age

Date of Birth

## Texas Dept. of Health Requirement: VISION – HEARING – SCOLIOSIS

**Vision and Hearing required:** students in PK, K, 1, 3, 5, 7 and all new students in grades 2,4, 6 and 8-12.

**Vision and Hearing encouraged:** students in grades 2, 4, 6, and 8 – 12 (unless new to the school then VH is REQUIRED).

**Scoliosis screening required:** grades 5 & 8, NEW students in grades 6, 7 and 9-12.

**Please note:** The school is required to submit a yearly report on VHS data to the Texas Dept. of Health. Your compliance is greatly appreciated.

### **If your student is required to have screening – you have two options:**

1. **You can provide results of screening – done in 2014 – no later than Wednesday Oct. 1, 2014. Results must have the following information – as required by the Texas Dept. of Health:** Results must be an “official record”– either from a doctors office or previous school and must have the following data: Full name, DOB, date of screening; **vision results** must record the right and left eye individually; **hearing** must be an **audiometric test** in right and left ears individually at 25 dB (or less) at 1000, 2000, and 4000 Hz. **NOTE: An “Otoacoustic Emissions Test” is not accepted as a hearing test by the TDOH.**

2. You can sign up below for the screening to be done at school on **Thursday Nov. 13, 2014.** Screening will be done by K. Tacquard, RN, CPNP and Assoc.– the same group of professionals we have used in the past. **Fees are listed below – payable to ACE Academy.**

### **Please select the option below that applies:**

1.  My student has had the required screenings and results are attached – with the data as described above.

2.  I will make separate arrangements for the required screening and provide ACE with the data – as described above – by Wednesday Oct. 1, 2014.

3.  My student will have the screenings checked below at ACE on Thursday Nov. 13, 2014.

**COST: Three tests – \$55 Two tests –\$45 One test – \$30**  
**Check should be made payable to ACE Academy.**

Please check which screenings are needed:

**Vision** \*Students who wear glasses/contacts must wear them for the screening on 11-13-14.

**Hearing**

**Scoliosis** **IMPT:** Screening is done privately – it requires that the back be exposed very briefly.

Please be sure that a polo type shirt (stretchy fabric) is worn and females must wear a camisole/ tank top under the shirt.

**The following information is helpful if your child is participating in the screening:**

Do you have any concerns about your student or any family history of problems with Vision, Hearing or Scoliosis?

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Parent or Guardian Signature

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Date