



**DO NOT
RETURN THIS FORM IF YOU WANT YOUR
CHILD TO RECEIVE A VISION SCREENING**

Dear Parent/Guardian

Good vision is essential to your child's learning. It is required that the parent or guardian of each student enrolled in kindergarten, at a public school in this state, shall provide certification to school personnel that the student passed a vision screening within the previous twelve (12) months or during the school year. Students enrolled in first or third grade at a public school, in this state, shall provide, within thirty (30) days of the beginning of the school year, certification to school personnel that the student passed a vision screening within the previous twelve (12) months.

Prevent Blindness Oklahoma will provide a vision screening on the date of _____ at _____ (school) that will satisfy this requirement.

Please sign this form and return it to the school by this date _____ if you do not wish to have your child, _____, receive a vision screening.

A vision screening does not substitute for a comprehensive eye examination by an eye care practitioner. If you have any concerns about your child's vision, contact an eye care professional about an eye examination.

(Parent/Guardian Signature)

Date



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