



DEPARTMENT OF THE ARMY  
US ARMY ROTC BATTALION  
VALLEY FORGE MILITARY COLLEGE  
1001 EAGLE ROAD  
WAYNE, PA 19087

CPA-VF

07 September 2007

MEMORANDUM FOR Professor of Military Science

SUBJECT: Statement of Acknowledgement for Civilian Dental Records  
Per CC PAM 145-4, Para 2-55 cadets are required to have dental films for casualty identification purposes for all those in the ROTC program who must use government-owned or government contracted transportation. The PMS is to ensure the cadet's dental records contain sufficient documentation to aid in forensic identification.

**ROTC CADETS PLEASE COMPLETE THE FOLLOWING**

\_\_\_\_\_ I have verified with my dentist that my dental records **do** contain descriptive profiles, bite wing x-rays, orthodontic profiles or dental x-rays for identification purposes.

\_\_\_\_\_ I have verified with my dentist that my dental records **do not** contain descriptive profiles, bite wing x-rays, orthodontic profiles or dental x-rays for identification purposes and have schedule an appointment.

My appointment is scheduled for \_\_\_\_\_, \_\_\_\_\_.  
(Date), (Time)

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
CADET PRINTED NAME

\_\_\_\_\_  
CADET SIGNATURE

\_\_\_\_\_  
DATE