

**Illinois State Board of Education**  
**Data Analysis and Progress Reporting**  
**100 North First Street**  
**Springfield, IL 62777**  
**Student Health Data - Dental**

**School Dental Summary for Liberty High School**  
**2025 - 2026**

	KG	2nd	6th	9th
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**In compliance with complete dental examination:**

White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			54	38
Other				
None				

**With Dental Sealants present on permanent molar teeth:**

White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			25	17
Other				
None				

**Without Dental Sealants present:**

White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				

## Student Health Data - Dental

### School Dental Summary for Liberty High School

2025 - 2026

	KG	2nd	6th	9th
Two or More Races				
Unknown			29	21
Other				
None				
<b>With Caries Experience / Restoration History:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			23	11
Other				
None				
<b>Without Caries Experience / Restoration History:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			31	27
Other				
None				
<b>With Untreated Caries:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				

## Student Health Data - Dental

### School Dental Summary for Liberty High School

2025 - 2026

	KG	2nd	6th	9th
Two or More Races				
Unknown			10	11
Other				
None				
<b>Without Untreated Caries:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			44	27
Other				
None				
<b>Needing Urgent Treatment:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			2	1
Other				
None				
<b>Not in compliance (no dental exam - no waiver - no religious obj - no medical reason - no disability problem - no approved appointment):</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				

# Student Health Data - Dental

## School Dental Summary for Liberty High School

2025 - 2026

	KG	2nd	6th	9th
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown			4	1
Other				
None				
<b>Waiver: not covered by private/public insurance</b>				
<b>(Medicaid/All Kids) - compliant:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown				
Other				
None				
<b>Waiver: ineligible for public insurance</b>				
<b>(Medicaid/All Kids) - compliant:</b>				
White				
Black or African American				
Hispanic or Latino				
Asian				
American Indian or Alaska Native				
Native Hawaiian or Pacific Islander				
Middle Eastern or North African				
Two or More Races				
Unknown				
Other				
None				
<b>Waiver:unable to find dentist/dental clinic that will accept Medicaid/All Kids - compliant:</b>				
White				
Black or African American				
Hispanic or Latino				

# Student Health Data - Dental

## School Dental Summary for Liberty High School

2025 - 2026

KG

2nd

6th

9th

- Asian
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- Middle Eastern or North African
- Two or More Races
- Unknown
- Other
- None

### **Waiver: no insurance, no low-cost clinics willing to see children - compliant:**

- White
- Black or African American
- Hispanic or Latino
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- Middle Eastern or North African
- Two or More Races
- Unknown
- Other
- None

### **Approved appointment scheduled - compliant:**

- White
- Black or African American
- Hispanic or Latino
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- Middle Eastern or North African
- Two or More Races
- Unknown
- Other
- None

### **Religious Objection - compliant:**

- White
- Black or African American

# Student Health Data - Dental

## School Dental Summary for Liberty High School

2025 - 2026

KG

2nd

6th

9th

Hispanic or Latino

Asian

American Indian or Alaska Native

Native Hawaiian or Pacific Islander

Middle Eastern or North African

Two or More Races

Unknown

Other

None

### Medical Reason - compliant:

White

Black or African American

Hispanic or Latino

Asian

American Indian or Alaska Native

Native Hawaiian or Pacific Islander

Middle Eastern or North African

Two or More Races

Unknown

Other

None

### Disability problem - compliant:

White

Black or African American

Hispanic or Latino

Asian

American Indian or Alaska Native

Native Hawaiian or Pacific Islander

Middle Eastern or North African

Two or More Races

Unknown

Other

None

### Waiver :submitted for undue burden/lack of access:

White

# Student Health Data - Dental

## School Dental Summary for Liberty High School

2025 - 2026

KG

2nd

6th

9th

Black or African American

Hispanic or Latino

Asian

American Indian or Alaska Native

Native Hawaiian or Pacific Islander

Middle Eastern or North African

Two or More Races

Unknown

Other

None

**# of those children enrolled in preceeding school  
year who submitted proof of an appointment  
scheduled within 60 days after the May 15th  
deadline subsequently submitted a completed**

**Proof of Dental Exam Form:**

White

Black or African American

Hispanic or Latino

Asian

American Indian or Alaska Native

Native Hawaiian or Pacific Islander

Middle Eastern or North African

Two or More Races

Unknown

Other

None