Schema for Non-participating Upload

The fields should appear in the following order in a comma separated list.

Headers (column names) are not permitted in the submitted file.

Value **1.** should be equal to the sum of values **2.** through **9.**

If data exist for values **11** and **12**, data must be reported.

These fields are to be reported by school site.

*Note: For 2006-2021, Value **1.** should be equal to the sum of values **2.** through **6.**

Data Schema format (2022-2023 - Current)

1. **Total_Eligible:** The total number of students at the school eligible for the assessment.
2. **Total_PoA:** The total number of students presenting proof of an assessment.
3. **Waive_Ins:** The total number of students that presented a waiver for unable to find dental office accepting dental insurance plan.
4. **Waived_FB:** The total number of students that presented a waiver for the purpose of financial burden.
5. **Waived_TO:** The total number of students that presented a waiver for unable to take time off or the dentist does not have convenient office hours.
6. **Waived_Trans:** The total number of students that presented a waiver for lack of adequate transportation.
7. **Waived_NC:** The total number of students that presented a waiver for reasons of non-consent by parents.
8. **Waived_Other:** The total number of students that presented a waiver for other reasons not listed.
9. **Not_Returned:** The total number of students that did not return either proof of an assessment or a waiver to the school.
10. **Opt_Out:** The total number of On-Site Dental Screenings Opt Out.
11. **Untrtd_Decay:** The total number of students that were found to have untreated decay.
12. **Total_CE:** The total number of students that were found to have had caries experience.
13. **TU_NOPF:** The total number of students with no obvious problem found.
14. **TU_EDRC:** The total number of students with early dental care recommended.
15. **TU_UCN:** The total number of students with urgent care needed.
16. **UC_Date:** The total number of parents notified that students has an urgent dental care need.
17. **FU_Apt:** The total number of students with a follow-up appointment scheduled.
18. **Rec_Yes:** Did child receive needed treatment? The total number of Yes.
19. **Rec_No:** Did child receive needed treatment? The total number of No.
20. **Rec_Idk:** Did child receive needed treatment? The total number of "I Don't Know".
21. **CDS_Code:** The county/district/school code of the school.

Data Schema format (2006-2021)

1. **Total_Eligible:** The total number of students at the school eligible for the assessment.
2. **Total_PoA:** The total number of students presenting proof of an assessment.
3. **Waived_FB:** The total number of students that presented a waiver for the purpose of financial burden.
4. **Waived_ND:** The total number of students that presented a waiver for lack of access to a doctor.
5. **Waived_NC:** The total number of students that presented a waiver for reasons of non-consent by parents.
6. **Not_Returned:** The total number of students that did not return either proof of an assessment or a waiver to the school.
7. **Untrtd_Decay:** The total number of students that were found to have untreated decay.
8. **Total_CE:** The total number of students that were found to have had caries experience.
9. **CDS_Code:** The county/district/school code of the school.