

GENERAL INFORMATION

In order to gain knowledge for the field of dental hygiene, the following mandate is utilized to ensure students have enough information to make an informed decision regarding the field of study prior to applying to the program. Dental Hygiene applicants must complete a minimum of 16 documented hours shadowing a dental hygienist in a dental office setting. We appreciate your assistance by completing this form which will become part of the applicant's admissions package. Please contact HCC's Nursing and Allied Health Admissions Team with any questions at 443-518-4230 or at alliedhealth@howardcc.edu.

Applicants, please ensure the document is filled out in its entirety before uploading to your online application. The online application for the summer program will be available between September 15 and January 15 at www.howardcc.edu/dentaladmissions.

TO BE COMPLETED BY THE APPLICANT

Applicant's Full Name: _____
first middle last

Address: _____
street city state zip code

Telephone: _____ **Email:** _____

Applicant Signature: _____ **Date:** _____

TO BE COMPLETED BY THE DENTAL HYGIENIST OR OFFICE MANAGER

Observation Facility Name: _____ **Telephone:** _____

Observation Facility Address: _____
Street city state zip code

Dates of Observation: _____ **Number of Observation Hours:** _____

Brief Description of Duties Observed: _____

Supervisor's Name: _____ **Title:** _____

Supervisor's Signature: _____ **Date:** _____

The Admissions Committee reserves the right to verify all observation sites.

For Office Use Only: Date Form Received: _____ Date Form Verified : _____