APPLICATION WORKSHEET
EXPANDED DUTY DENTAL ASSISTING

Applicant instructions: This form must be completed by the Certified Dental Assistant, graduate of an ADA-accredited Dental Assisting program, or an Expanded Duty Dental Assisting in a general dentistry practice that you observed. A minimum of five hours of observation must be completed.

Form must be submitted to Admissions office in building 410, Main Campus or fax 843.574.6483 or email to julie.douglas@tridenttech.edu.

_________________________________________    ______________
Applicant’s Name                                      Student ID #

This applicant has completed__________ hours of observation work at

_________________________________________    __________________________
Name of Facility                                        Phone Number

In_                      ____ City
                       State

_________________________________________
CDA or EDDA Name (Please Print)

_________________________________________    ______________
Signature                                      Date