DENTAL HYGIENE

Application period: October 2, 2020 through 5:00 pm January 29, 2021. All Applications are to be postmarked to the address below by the deadline.

Date Stamp When Received:

HEALTH SCIENCE DEPARTMENT Santa Rosa Junior College Race Building, Dental Hygiene Program 1501 Mendocino Avenue Santa Rosa, California 95401 (707) 527-4271 • (707) 527-4426 Fax

APPLICATION FOR ADMISSION TO THE DENTAL HYGIENE PROGRAM Fall 2021

Please print clearly: this information will be used to contact you.

SRJC Student ID#:	you must su https://admissions.santarosa.edu	ıbmit an SRJC College	Application to
obtain this number - (https://admissions.santarosa.edu	i/new-or-returning-stud	<u>ents</u>)
NAME IN FULL:			
		rst	Initial
Previous last names that	may appear on your records/transc	eripts:	
Mailing Address:			
-	Street Address		
-	City	State	Zip Code
Home Phone:	Work Phone:	Cell Phone	:
E-mail Address:			
	on: Em		
<u>It is your responsibili</u>	<u>ty to notify the Health Science o</u> address, phone numl		ou have a change of
	audi ess, phone num		
programs web page pri-	e completely read all information a or to completing this application. contact a health science counselor	It is also highly recomme	ended that all interested
Submitting an appl	ication to the Dental Hygiene Prog processes		C are two separate
DUI), and crimes of violence. It is t acceptance into the DH program, an rehabilitation, and whether th	mes substantially related to the practice of dental hygi he responsibility of the applicant to present sufficient y student who has had a conviction related to any of t e DHCC should be notified. Questions that students n Dental Hygiene Committee of California, 20 Sacramento, CA 95815 (916) 263-19 sure in California must have a U.S social security num licensure in the State of Californi	evidence of rehabilitation to the DHCC he above should contact the director of 1 nay have related to possible denial for li 05 Evergreen Street Ste. 1050, 7/8 - www.dhcc.ca.gov ber (SSN) or a Federal Employment Ide	prior to licensure application. Upon the program to discuss the problem, censure should be referred to:

IMPORTANT:

- You Must Complete all tasks on the SRJC Dental Hygiene Program Application Checklist. The checklist is for your information and is <u>not</u> returned with this application.
- You Must Complete the SRJC Dental Hygiene Application.
- You Must Complete the SRJC Dental Hygiene Prerequisite Course Worksheet. The worksheet <u>MUST</u> be included with this application.
- Program Prerequisite courses must be completed before applying to the program.

Have you applied to the SRJC Dental Hygiene Program before? If so, what year(s) did you apply?	□ Yes □ No
Have you even been enrolled in a dental hygiene <u>or</u> dental school? Have you attended a program in any college or another country? Please list	□ Yes □ No

You MUST list <u>ALL</u> colleges attended beginning with the most current

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Dates From - To	Institution and Address	Diploma, Degree or Certificate	Date Conferred

COMPLETE DENTAL HYGIENE PROGRAM PREREQUISITES

Have you met with an SRJC Health Sciences counselor to discuss your prerequisites to the dental hygiene program? _____Yes ____No

If no, we highly suggest meeting with a SRJC Health Science counselor prior to submitting your application.*

* Program and degree prerequisite information may be gained by consulting with a SRJC Health Science Counselor.

IMPORTANT:

- Applicants for the 2021 program must complete their prerequisite courses and have grades entered onto their official transcript by the Application Deadline of **January 29, 2021.**
- The prerequisite requirements for the DH major are found on the <u>dentalprograms.santarosa.edu</u> webpage.
- Grades from the science prerequisite courses must average a minimum GPA of 2.7
- Grades from the non-science prerequisite courses must average a minimum GPA of 2.5.

COLLEGE TRANSCRIPTS

- <u>If ALL your coursework was completed at SRJC</u>: you must submit unofficial transcripts with your dental hygiene application.
- <u>If you are a current SRJC student AND have attended other colleges:</u> You must attach a copy of your unofficial transcripts for all your SRJC coursework and **Official Transcript(s)** of your other college coursework with the DH application.
- <u>If you are NOT a current SRJC student</u>: You must submit an <u>SRJC application</u> and acquire a SRJC student ID #. You must also submit the dental hygiene application to the address above with Official Transcripts from all college coursework.

NOTE: Dental Hygiene will accept copies of Official Transcripts from other schools that are printed from Ilinx with the dental hygiene application.

Please refer to the most current dental web page information for the selection process.

<u>DO NOT</u> call or email the Health Sciences Department or the Dental Hygiene Program Director for application or acceptance status.

If you wish verification that your paperwork was received, please mail your application by certified mail with a return receipt. Applicants will be notified via email of the status of their acceptance into the Dental Hygiene Program after the review process is complete.

Documents submitted to the Health Sciences Department become the property of the Department and may be disposed of at our discretion.

All completed applications including official and/or unofficial transcripts and prerequisite course worksheet must be postmarked by 5:00pm on the deadline date.

INCOMPLETE or LATE APPLICATIONS WILL NOT BE ACCEPTED

Deadline:

5:00 PM, Friday, January 29, 2021

Please make sure you have included a reliable email address in this application. Any changes to your contact information must be reported to the Health Sciences Office at the address at the top of the application.

I have read the application and understand the eligibility criteria for admission into the Dental Hygiene program. I certify under penalty of perjury that the statements in this application are true to the best of my knowledge and ability. Falsification of information on this application will be considered grounds for dismissal.

Printed Name of Applicant

Signature of Applicant

Date