



Dental Hygiene Admission Application

Personal Data:

NAME: _____
 ADDRESS: _____
 EMAIL: _____
 CELL PHONE: _____
 BIRTHDATE: _____
 BVCTC Student ID/B Number: _____

The Dental Hygiene program is a limited enrollment program which admits one class each fall semester. An admissions committee selects candidates. To be considered for admission, applicants **must** first meet the following minimum requirements:

Dental Hygiene Admission Requirements

Course Title:	Where Course was Taken:	Semester/Year Course was Completed:	Grade:	Currently Enrolled in Course at:	Plan to Take Course in the Future Where and When
BIOL 220 – Human Anatomy					
BIOL 221 – Human Physiology					
CHEM 110 – Fundamentals of Chemistry					
MATH 111 – Math for Healthcare					
ENGL 101 – English Composition I					
ENGL102 – English Composition II COMM 100 – Oral Communication OR ENGL 202 – Business & Professional Writing					
SOCI 101 – Introduction to Sociology					
PSYCH 101 – General Psychology					
DENT 100 – Introduction to Dental Hygiene I					
GNST 102 – First Year Experience I					

In addition to completing this online application, all applicants must submit:

1. Two letters of recommendation – emailed directly to dental.hygiene@bridgevalley.edu.
2. 20 hours of dental hygiene shadowing experience. Verification form available on the website.
3. Official copy of previous college transcripts sent directly to BridgeValley CTC Admissions.

Have you applied to BridgeValley Community and Technical College by completing the college online application?

Dental Hygiene applicants must be eligible to meet the requirement for licensure in the State of West Virginia as stated by the West Virginia Dental Practice Act.

Please respond to all questions.

If you answer “yes” to any question, you must attach a written explanation.

1. During any professional/dental hygiene education, were you ever dismissed, suspended, restricted, disciplined, placed on probation or otherwise acted against or did you take a leave of absence?
2. During any professional/dental hygiene education, were you ever requested to leave or did you leave temporarily or permanently, prior to completion of training?
3. Have you ever had an application for a license/certificate in any health care profession refused or denied by any licensing board, regulatory agency, health care facility or other entity?
4. Have you ever had any written complaint, formal accusation, final order, disciplinary action, malpractice or consent order filed against you by any person, jurisdiction, licensing board or regulatory agency?
5. Have you ever been arrested, charged or convicted, pled guilty or pled nolo contendere for violation of any federal, state, or local law (other than a minor traffic violation)? (DWI & DUIs are not minor traffic violations). (Although a conviction may have been expunged from the records by order of the court, it nevertheless must be disclosed in your answer). You must attach the court disposition.
6. Are you currently under investigation or the subject of pending disciplinary action by any licensing board, regulatory agency, health care facility or other entity?
7. Currently or within the last five years, have you been treated for any physical, mental or emotional condition that might interfere with your ability to competently and safely perform the essential functions of practice?
8. Currently or within the last five years, have you been treated for drug or alcohol addiction that might interfere with your ability to competently and safely perform the essential functions of practice?
9. Currently or within the last five years, have you developed any disease or condition, physical, mental or emotional, that might interfere with your ability to competently and safely perform the essential functions of practice?

I affirm that the information I have provided on this application form and all other admission application materials are complete, accurate, and true to the best of my knowledge. I give permission for BridgeValley Community and Technical College to contact any institution or person listed to verify this information.

Signature of Applicant

Date

Current students enrolled in BridgeValley Community and Technical College who meet the above guidelines will be given first consideration for admission when having the same qualifications as an off-campus student.

Bloodborne Pathogens/Radiation Safety/HIPAA/Ethics Policies:

Department policies related to bloodborne pathogens, radiation safety, HIPAA and Ethics are available for review at www.bridgevalley.edu.

Dental Hygiene program application, recommendation letters and shadowing verification form are due by January 31st for consideration for fall admission.

- The two letters of recommendation and shadowing verification form must be scanned and emailed to dental.hygiene@bridgevalley.edu
- Official transcripts must be sent to the BridgeValley Admissions Office.
- Submit this completed Dental Hygiene Program Application for Admission by selecting SUBMIT now.

If you are having troubles submitting this form online, there may be a compatibility issues with your web browser. To fix this issue, go to your downloads folder and open this application in Adobe Acrobat on your computer. [You can download a free copy of Adobe Acrobat by clicking on this link if you need one.](#)