Thank you for your interest in the Dental Hygiene Program at Coastal Bend College. We have an excellent record of educating future dental hygienists and we look forward to helping you meet your goals. Class size is limited; therefore, admission is competitive using criteria indicative of probable success in the program. The application with all essential information should be submitted with the $50 non-refundable application fee, paid by money order. **The Deadline for 2019 applications is May 31, 2019.**

The **essentials** for a completed application include the following:

1) Completed Dental Hygiene application for admission.

2) Original college transcripts for all colleges attended.

3) Students must be in compliance with the Texas Success Initiative (TSI), (Texas Education Code §51.3062) to enroll in Texas public institutions of higher education. [http://www.coastalbend.edu/per/](http://www.coastalbend.edu/per/) A copy of THEA, ACT scores, or SAT scores, unless criteria has been previously met at another Texas college or university.

4) Proof of dental assistant certification/registration if applicable.

5) A $50.00 money order payable to Coastal Bend College (U.S. Currency).

**IT IS THE SOLE RESPONSIBILITY OF THE APPLICANT TO MAKE SURE ALL REQUIRED PAPERWORK AND INFORMATION IS RECEIVED IN THE DENTAL HYGIENE DEPARTMENT. THIS INCLUDES UPDATING PREVIOUSLY SUBMITTED TRANSCRIPTS. THE DENTAL HYGIENE DEPARTMENT WILL NOT FOLLOW UP ON ANY INFORMATION THAT IS NOT IN YOUR FILE. YOUR FILE WILL NOT BE CONSIDERED IF ALL INFORMATION IS NOT INCLUDED.**

Please submit the college application and official transcripts to:

Coastal Bend College  
Department of Dental Hygiene  
3800 Charco Rd.  
Beeville, TX 78102

The Admissions Committee begins to consider applications in early spring and will continue until the class has been filled. They select the strongest possible applicants for the class; therefore, the better the qualifications, the better the opportunity for selection. Letters of recommendation are not required, but will be considered if sent. The determinants for admission are **college course work, college placement test scores, previous degrees awarded (bachelor, master), and dental chair side experience. All applicants will be notified of acceptance or denial by June 2019.**

**Prerequisites (within the past five years)**

- Chemistry (CHEM 1306) Allied Health Emphasis  
- Chemistry Lab (CHEM 1306)

- Anatomy and Physiology I (BIOL 2301)  
- Anatomy and Physiology I Lab (BIOL 2101)

- Anatomy and Physiology II (BIOL 2302)  
- Anatomy and Physiology II Lab (BIOL 2101)
Updating transcripts in these courses is the responsibility of the applicant.

It is strongly recommended that the other general studies courses within the dental hygiene curriculum be completed before applying. Coastal Bend College has a four day instructional week, making enrollment in courses other than dental hygiene in the fall and spring semesters difficult. Options to consider would be to take these general studies courses during summer sessions or online.

Grades for ALL courses in the dental hygiene curriculum, whether transferred from another college or on our campus, must have a grade of at least C to satisfy requirements of the program, and the applicant must be in good standing with the institution. Most courses will transfer from an accredited college with a C or better, but we must have an official transcript with a description of the course before credit can be awarded. Academic performance in these courses is scored according to the grade achieved, with three science courses weighted more heavily than the non-science classes. A grade of D or F in any of the dental hygiene program general studies courses will be factored into the process.

For example, there are three science courses in prerequisites. The grades for the courses in this section will be divided by three and multiplied by two giving an average in that category. If a course is retaken to improve a C, the higher grade is used with no penalty. If, however, a course is retaken to replace a D or F, that attempt will be factored as an additional course-sum of grade category divided by the number of attempts such as four rather than three. There will be six general education courses. The grades for the courses in this section will be divided by six giving an average in that category.

The program begins in the fall semester, but the basic courses can be taken starting at the beginning of any semester.

The practice of Dental Hygiene has hazards and an inherent risk of exposure to blood and/or blood-containing body fluids thereby risking exposure to microbial infection. This risk includes, but is not limited to, possible exposure to Hepatitis B and Human Immunodeficiency virus - Type I (HIV-1). The CBC Dental Hygiene Program shall not inquire about the blood borne infectious disease (BBID) status of any applicant for admission to the program; however, once accepted, the BBID status must be reported.

The admission of an applicant with a BBID can only be denied on the basis of such infection if an appointed group consisting of the Dean of Student Services, the student, the student's physician and/or the State Health Department determines that the student might pose a risk of transmission to others in the classroom and the college program. The student may also be denied admission to the Dental Hygiene Program if the applicant's infectious status would prevent him/her from completing essential degree requirements and that a reasonable accommodation could not be made to enable the applicant to do so. The Dental Hygiene Program will not initiate mandatory BBID screening of students, faculty, and staff unless justified by evidence of significant risk to patients. If screening becomes necessary, care will be taken to assure confidentiality and preservation of rights.

Coastal Bend College offers financial aid. Please call (361) 354-2238 for more information.

We hope that you will make two excellent choices: Coastal Bend College for your education and dental hygiene for your career. We look forward to hearing from you!

Please call us at (361-354-2555) if we can help you further.
2019 Coastal Bend College Dental Hygiene Application Form

Date of Birth                                      Date of Application

Name ____________________________________________

Last                                      First                              Middle                                 Maiden

Address ____________________________________________

City                                            State                    Zip

Phone ____________________________________________

Home                                               Work                                           Cell

Email ________________________________ Social Security Number

Do you meet age requirement of 18-year old? Yes _____  No____

U.S. Citizen __ Other __________________________

Have you previously attended any dental hygiene program? Yes ____ No ____ If yes, what school

______________________________

If yes, you must provide a letter of good standing with this application.

List all Dental Hygiene Programs to which you are applying (for CBC research data only):

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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WORK RECORD-Include only dental-related work experience (6-month minimum)

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<thead>
<tr>
<th>Firm’s Name</th>
<th>Address</th>
<th>Employment Dates</th>
<th>Position</th>
<th>Reason for leaving</th>
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EDUCATION HISTORY - Complete all applicable spaces

High School Attended ___________________________ Graduated____ GED ____ Date of Graduation________

ACT Test Taken within 5 years: Yes ____ No ____ Date Taken ___________ ACT Composite Score _____

TSI Complete ________

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<thead>
<tr>
<th>Prerequisites within past 5 years</th>
<th>Name of School</th>
<th>Semester</th>
<th>Year</th>
<th>Grade</th>
<th>In Progress</th>
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</thead>
<tbody>
<tr>
<td>BIOL 2301 Anatomy/Phys. I &amp; BIOL 2101 Lab</td>
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<tr>
<td>BIOL 2302 Anatomy/Phys. II &amp; BIOL 2102 Lab</td>
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<tr>
<td>CHEM 1306 Introduction Chemistry &amp; 1106 Lab</td>
<td>(Allied Health Emphasis)</td>
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</table>
### Co-requisites

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<tr>
<th>Co-requisites</th>
<th>Name of School</th>
<th>Semester</th>
<th>Year</th>
<th>Grade</th>
<th>In Progress</th>
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<tbody>
<tr>
<td>ENGL 1301 Composition/Grammar</td>
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<td>SOCI Sociology Elective</td>
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<td>PSYC 2301 or 2314</td>
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<tr>
<td>BIOL 2320 Essentials of Gen. &amp; BIOL 2120 Lab</td>
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<tr>
<td>BIOL 2120 Lab</td>
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<tr>
<td>HUMA Humanities/Fine Arts</td>
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<td>SPCH 1311 Speech Communication</td>
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**Within past 5 years**

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<tr>
<th>Co-requisites</th>
<th>Name of School</th>
<th>Semester</th>
<th>Year</th>
<th>Grade</th>
<th>In Progress</th>
</tr>
</thead>
</table>

**Certification Awarded:**

Certification Awarded: ____________________________________________________________

**Degree Awarded:**

Degree Awarded:  ____ Yes  ____ No  Baccalaureate & higher _______________________  

**College Degree Awarded From:**

College  State  Country

I hereby certify that the above information is correct to the best of my knowledge. I also understand that Coastal Bend College Dental Hygiene Department will maintain my personal information in a secure and confidential manner.

Signature: _____________________________________  Date: __________________________

**Important Deadlines:**

All applications, transcripts, Hep B shot records and or titer and TB screening must be received prior to May 31st.

Each September all application files will be shredded unless the applicant requests otherwise.

Remember, it is the applicant’s responsibility to verify with the department administration support specialist that all records have been received and the file is complete, BEFORE the application deadline May 31st. This includes credit for all courses work completed prior to entering the program.

**Attach documentation for** the following immunization series initiation or completed (1st dose must be prior to May 31st application deadline):

**HEPATITIS** - three (3) doses or a positive Hep B surface antibody test

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<tr>
<th>DOSE 1</th>
<th>DOSE 2</th>
<th>DOSE 3</th>
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HEP B Surface Antibody (titer)  Date ______________ Reactive ________ Non-Reactive ___________

DH 2019 Application