

MUST BE FILLED OUT IN APPLICANT'S HANDWRITING

Candidate's Name: _____ Date: _____

Home Address: _____

Cell Phone: _____ E-mail: _____

List any honors or awards you have received in high school or college:

List any community organizations, church, or school groups:

List any military or work experience:

What accomplishment(s) are you most proud of?

Why do you think dental hygiene is the career choice for you?

Where do you see yourself in 10 years?

Give an example of how you resolved a conflict or interpersonal problem.

Please list below any college you are now or have attended, dates of attendance, and any degrees earned.

COLLEGE

DATES

DEGREES

Please indicate the year you completed the following courses.

- If you are currently enrolled in any of these courses, write "CE" to indicate currently enrolled.
- If you are planning to take any courses during the summer write "Summer" and the name of the institution where you intend to enroll.

- English Comp. I _____
- Sociology _____
- Intro Computer _____
- General Psychology _____
- Math _____
- Nutrition _____
- A&P I & Lab _____
- A&P II & Lab _____
- Chemistry & Lab _____
- Microbiology & Lab _____
- Public Speaking _____
- Medical Vocabulary _____
- Humanities (*Literature, Music, Art, History, etc.*) _____
- Electives _____

ACT Score _____ **SAT Score** _____

Are you currently enrolled at MCC? Yes ___ No ___ Program _____

Are you or your spouse active-duty military? Yes ___ No ___

If accepted, I would like to be included in a group e-mail of classmates. Yes ___ No ___

I verify that the above information is correct and that I have received a program packet.

Signature

Date

Email Information Sheet to Cindy.Herrington@meridiancc.edu