

INFORMATION SHEET

Candidate's Name: _____ Date: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

MUST BE FILLED OUT IN APPLICANT'S HANDWRITING

1. Please list any honors, awards, you have received in high school or college:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

2. Please list any community organizations, church or school groups :

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

3. List any dental observation time/ dental work experience:

1. _____
2. _____
3. _____
4. _____

4. List any military or work experience:

1. _____
2. _____
3. _____
4. _____

5. What accomplishment(s) are you most proud of?

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

