



Dental Hygiene Program – Lewis-Clark State College

Application Fall 2014

Forms Packet

FORM 1 CONDITIONS FOR APPLICATION

Complete all portions of this form as directed. List name as indicated in [myLane](#)

L# _____ FIRST _____ LAST _____

Email - required _____ 1st – Phone- _____ 2nd Phone _____

All courses were taken at LCC

Official Transcripts from other colleges have been submitted to Lane Enrollment Services – Attention: HP Transcript –
Lane Community College - 4000 East 30th Ave, Eugene, OR 97405

Application Conditions and Program Progression Completion Requirements

In submitting my DH program application by email to HPApplicationCenter@lanecc.edu , I affirm the following:

- I took all of my prerequisite courses at Lane Community College,
OR I have submitted official, sealed transcripts from colleges other than Lane to [Lane Enrollment Services](#)
- I have completed the [LCC Credit Admission](#) process and have an L number.
OR I have previously taken credit classes at Lane and have an L number.
- I have completed the Dental Hygiene Online Admissions Application & Payment process, including paying the **\$50 non-refundable** application fee.
- I understand all information in the Fall 2014 Dental Hygiene LCSC Application Information Packet. **I am NOT considered an applicant to the program unless all required forms and documentation are completed and submitted according to application instructions prior to the application deadline.**
- My application will not be returned and I am responsible for making a personal copy.
- I have read the Fall Enrollment Requirement Section and understand I must attend the mandatory orientation and comply with all other enrollment requirements if I am accepted or considered a program alternate.
- I understand it is my responsibility to complete all program requirements for degree completion.
- I have met with and had my courses evaluated by Jacob Hornby, Ph.D. Professor/Pre-health Professions Advisor at LCSC (208) 792-2441 or jmhornby@lcsc.edu.
- I understand I must successfully complete all DH prerequisites courses before Fall term 2014 to enter the program.
- I hereby attest that all application information and documentation I have submitted in this packet is accurate and authentic.

Forms 1 and 2 submitted scanned, Google docs, handwritten or delivered in person will not be accepted. Be sure to use the latest version of Adobe Reader to complete this Form.

Macintosh users – do not use “Preview” to view or complete this Form. Set Adobe Reader as the default PDF reader.

**Submit all supporting documentation attached to
ONE email by the deadline:**

HPApplicationCenter@lanecc.edu

Health Professions Application Center

Subject – Student Name L number DH LCSC

Application Documentation

Change to file name:

DHLCSCForms2014LastNameLNumber

On the same date or before:

Lane Transcript and/or submitted transcripts to [Enrollment Services](#) reflect courses and degree(s) listed on Point Petition Sheet.

Online Dental Hygiene Program Admissions Application and Payment has been submitted.

FORM 2 POINT PETITION SHEET			Lane DH LCSC Fall 2014		Courses must meet minimum credit requirement shown. Enter grade point values in the right hand column 'Points'			
See 2014 Dental Hygiene Application Information Packet for application requirements and for Course Equivalency & Transfer requirements if course was not taken at Lane.								
Part 2A. Prerequisite Courses listed must be completed by the end of Winter 2014 or be listed as "in Progress" on unofficial transcript.	Course/School	Term/Year	# Credits	Grade C	Grade B	Grade A	Indicate Points Earned	
Item 1: Mathematics Requirement:								
MTH 052, or higher (3 Cr or more),				1	1	2		
Item 2: Writing Requirement:								
WR 121 (3 / 4 Cr) OR				1	1	2		
Prior Bachelor's degree, must appear on a submitted transcript			n/a	n/a	n/a	2		
Item 3: Choice of either Chemistry and Biology (2 courses) OR full Chemistry (1 course): Full chemistry must be within the last 7 years								
CH 112 (3 / 4 Cr)				2	4	4		
AND BI 112 (3 / 4 Cr) OR				Grade Received: No point value				
CH 100 or higher (5 Cr)				2	4	4		
Items 4: Human Anatomy and Physiology 1 and 2 (2 courses):								
BI 231 (4 Cr)				1	3	3		
BI 232 (4 Cr)				1	3	3		
Item 5: Nutrition Requirement:								
FN 225 (4 Cr)				1	1	2		
Items 6: Psychology and Sociology Requirements:								
PSY 201, 202, or 203 (3 / 4 Cr)				1	1	2		
SOC 204, 205, or 206 (3 Cr)				1	1	2		
Item 7: Speech Requirement:								
SP 100 or 111 (3 / 4 Cr)				1	1	2		
Item 8: Entrance 2014 HOBET Test: Minimum to apply is 50 points. Enter points associated with your score. Example: 72%= 72 = 6 points								
50-60 = 4	61-70 = 5	71-80 = 6	81-84 = 7	85-88 = 8	89-91 = 9	92-94 = 10	95-97 = 11	98-100 = 12
Part 2B. Additional Courses additional admittance points given								
Items 9: Human Anatomy and Physiology 3 and Microbiology: BI 234 must be within the last 7 years prior to Fall entry								
BI 233 (4 Cr)				2	4	4		
BI 234 (4 Cr)				2	4	4		
Item 10: Writing Options:								
WR 123 or 227 (3 / 4 Cr)				1	1	2		
Total Course Points Earned								
Part 2C. Additional Points.								
Required Pre-requisite Course Cumulative GPA: Total of course letter grade values A= 4, B= 3 divided by total credits. - ≥ 3.0 GPA							= 2 pts	
Work Experience: Attach the Dental Office Work Verification Form 4 – one per employer							= 2 pts	
Spanish Language Proficiency: Include transcripts for College Courses (list course information below) or CLEP Testing Results.							= 2 pts	
Residency: Submit Residency form with your applications forms, this form must be signed by the LCSC Registrar and scanned.							= 2 or 3 pts	
Deductions: Two points per occurrence will be deducted for each N/P, W, NC, *, D, or F in BI 231-233, Summer Term 2013 or later.							= minus 2 pts each	
Total Points for Course Completion and Additional Points (Points Possible 53)								

Be sure to do the Online Application and Payment Process to complete your final step to apply to the DH Program.
List any additional information that didn't fit into spaces provided above: