

Dental Assisting Admission Requirements Certification

Name _____ Student ID # _____

Address _____ Telephone _____

**This form must be submitted with your application for admission to the Dental Assisting Program.
Your application will not be processed without this form.**

Required Admission Course Prerequisites:

You must complete the following admission course prerequisites before you will be considered for admission. List the schools that you attended and the final grade that you received to show how you met each of them. *(You must submit official transcripts for each school listed below.)*

General Mathematics from High School or College with a grade of C or higher (73% or higher).

I earned a grade of _____ in General Mathematics at _____ (school) or I am enrolled in General Mathematics at _____ (school) and will complete it by May 31, 2014.

Biology from High School or College with a grade of C or higher (73% or higher).

I earned a grade of _____ in Biology at _____ (school) or I am enrolled in Biology at _____ (school) and will complete it by May 31, 2014.

Admission Requirements: *Check all that apply*

- I have enclosed a completed Middlesex Community College Admission Application.
- I requested or sent official transcripts that document that I completed General Mathematics and Biology.
- I have read and understand the Standard Skills for Dental Assisting included in the admission materials.
- I understand that there are additional requirements if I am admitted to this program.
- I understand I must provide my own transportation to the program's internships.
- I understand that non-Massachusetts residents will be admitted on a space available basis only.
- I understand that I must complete the Middlesex Community College Placement Test with minimum scores of ENG 071 and a Reading score of 68. Students are also required to take the Math Placement test to determine appropriate placement for math requirements in the program. Testing must be completed before admission and within one year of the application deadline. *(To schedule a testing appointment call 1-800-818-3434 or visit the Student Information Center on the Bedford or Lowell Campus)*
- Yes**, I have met all requirements to be considered for admission to this program and I understand the admission application deadline, including all required documents and testing is March 1, 2014.
- No**, I have not met the admission requirements to be considered for admission to the Dental Assisting program but wish to be admitted to Middlesex Community College in the **Liberal Studies** program where, with the assistance of an academic advisor, I can develop an individualized pre-health course of study appropriate to my specific education interests or needs.

By signing below, I certify that all of the information I provided on all of my application materials is accurate and complete.

Signature _____ Date _____

Applicants must submit this form and all application documents to the Student Information Center on the Bedford or Lowell campus or mail them by March 1, 2014:

Middlesex Community College
Enrollment Services Department
33 Kearney Square, Lowell, MA 01852-1987