

Dear Dental Hygiene Applicant:

We are pleased you expressed interest in the Dental Hygiene Program at Eastern Washington University. In order to be considered for the 2021-2023 cohort, you must apply to Eastern Washington University and indicate Dental Hygiene as your major, complete the enclosed application packet and submit all the required documentation in PDF format to the department by February 1, 2021. Failure to include all required documents will affect consideration for the program. Your completed application packet should include the following documentation:

___ Student Cover Checklist

____ Application for Admissions

___ Observation Form

___ Resume

___ Official Transcripts sent to EWU Undergraduate Admissions

To ensure consideration for the Dental Hygiene Program at Eastern Washington University, application packets must be submitted to the Department by February 1, 2021 at 3pm. It is the student's responsibility to make sure all documents are completed. Please submit the completed packet to: dentalhygiene@ewu.edu

Thank you for considering Eastern Washington University's Dental Hygiene Program. If you have any questions or concerns about the application process, feel free to contact the Program Specialist at <u>dentalhygiene@ewu.edu</u>.

Sincerely,

Lion Bilich

Lisa Bilich RDH, MSEd Department Chair Professor of Dental Hygiene

Eastern Washington University Dental Hygiene Application Requirements

- 1. Attend a Dental Hygiene Information Session (Required).
 - a. <u>https://www.ewu.edu/chsph/dental-hygiene/entry-level-bachelor-of-science/</u>
- 2. Apply to Eastern Washington University in December 2020. Submit official transcripts with the most current fall quarter/semester of college or university coursework. Pay the \$60.00 application fee.
 **Current EWU Students do not need to apply to EWU or send transcripts.
 To apply: https://www.ewu.edu/apply/ and select 'Transfer'
- 3. Pay the \$50.00 Dental Hygiene application fee by February 1, 2021.
- **4. Email the receipt from the \$50.00 application fee** to: <u>dentalhygiene@ewu.edu</u> Upon verification of this payment, instructions for taking the Health Science Reasoning Test (HSRT) are sent to you.
- 5. Take the Health Science Reasoning Test (HSRT). Deadline for completing the HSRT is February 3, 2021 at 3pm. HSRT exam is not proctored. Take it anywhere there is a strong internet connection. Only 1 attempt is allowed.
- 6. Complete the Dental Hygiene Program Application. Note transcript requests from ALL colleges / universities attended on the application. Transcripts must include grades through fall quarter / semester 2020. Resume and documentation of observation hours included. Application has been signed and dated (electronic signature encouraged).
- 7. Review application and documents for completion. <u>Handwritten, incomplete or applications received</u> <u>after the deadline will not be considered.</u>
- 8. E-Mail completed application packet to: <u>dentalhygiene@ewu.edu</u>
 - a. Applications will <u>only</u> be accepted in PDF format and will be returned if not submitted in the correct format or are missing documents.

Things to Remember

- *Inform Dental Hygiene Program Specialist immediately if email address used on dental hygiene application has changed.
- **Check email address used on dental hygiene application for letter regarding application status. Letters will be emailed on or after March 15th, 2021.
- ***Strongly recommended submitting application from EWU Student Email to prevent application from being recognized as SPAM.

EWU Dental Hygiene Program Fall 2021 Application Cover Checklist

Applicant Name: _____

Date: _____

- Attend a Dental Hygiene Information Session prior to February 1, 2021.
 - Date Attended_____
- _____ Apply to Eastern Washington University in December 2020. Select Fall 2021.
 - (Select Summer if you need to attend EWU for prerequisite completion).
- Pay \$60.00 EWU Application Fee.
- Submit ALL college / university official transcripts to EWU Admissions. Transcripts must include grades through fall quarter / semester 2020. Transcripts can be sent electronically or directly to the EWU Admissions Office:

Undergraduate Admissions 304 Sutton Hall Cheney, WA 99004

- Pay the \$50.00 Dental Hygiene Application Fee through EWU Marketplace Link no later than February 1, 2021 at 3pm. *This fee is non-refundable.*
 - <u>https://secure.touchnet.net/C20347_ustores/web/product_detail.jsp?PRODUCTID=70</u> (If link opens to an error page, copy and paste the web link in the website browser)
- Email receipt for \$50.00 DH Application Fee to: <u>dentalhygiene@ewu.edu</u> no later than February 1, 2021 at 3pm.
- Complete the HSRT exam no later than February 3, 2021 by 3pm (instructions will be sent by <u>dentalhygiene@ewu.edu</u> after receipt for \$50.00 DH application fee has been received.)

____ Complete EWU Dental Hygiene Application:

_____ Set up EWU Student Email

_____ Observation Hours (Please use my Observation Hours from my previous application _____))

_____ Resume (Resume must have sections that outline the following: Work Experience, Leadership/ Honors/Awards, and Community Engagement/Volunteer Work)

_____ Diversity Experience Statement

_____ Life Experience Statement

_____ Verification of Proficiency in Foreign Language (if applicable)

E-Mail completed EWU Dental Hygiene Application and supporting documents in PDF format by 3pm on February 1, 2021 to <u>dentalhygiene@ewu.edu</u>.

** Applications will not be accepted before December 16, 2020.**

APPLICATION FOR ADMISSION TO THE DENTAL HYGIENE PROGRAM COLLEGE OF HEALTH SCIENCE AND PUBLIC HEALTH EASTERN WASHINGTON UNIVERSITY

Please type and answer all questions completely and accurately.

GENERAL INFORMATION				
Date of application	EWU Student	ID Number (required)		
Legal Name				
Former Name(s) if any (list all)				
Pronouns: They / Them / Theirs	He / Him / His	She / Her / Hers		
Current mailing address				
Street		City	State	Zip
Hometown address				
(if different) Street		City	State	Zip
Primary phone number				
Secondary phone number (if applicable)				
EWU Email address:				
Email address:	(Required)			
What race do you consider yourself? Caucasian Chinese	Africa Korea	an-American an		
Japanese		inic/Latina/o/x American		
American Indian & Native HawaiiansAsian American & Pacific Islander VietnameseOther race (please list)				
Are you the first in your family to attend co	llege/university?	Yes No		
Have you applied to the EWU Dental Hygier	ne program before?	Yes No	-	
If yes, what year(s) did you apply:				
Have you been enrolled or dismissed from a	a dental hygiene pro	gram in the U.S.?Y	es No	
If yes, which program:				

COLLEGE OR OTHER POST-HIGH SCHOOL INSTITUTION ATTENDED OR CURRENTLY ATTENDING

Complete name of transferable associate degree (including "option"), if applicable.

Name of College (City & State)	Dates Attended (MM/YYYY to MM/YYYY)	Degree(s) Earned or Seeking	Date Degree Awarded or Expected Graduation	Date Transcript Requested

*Please send official copies of transcripts from all colleges attended. Current EWU students do not need to submit transcripts. Official transcripts must be sent to Registrar's Office.

DENTAL HYGIENE PREREQUISITE and EWU Graduation Requirement COMPLETION WORKSHEET: Pleas list the courses that you are currently taking and plan to take to complete general education and dental hygiene prerequisites before starting the program, if admitted. If your school is on the semester system, please indicate below:

Winter 2021				
Course Name and Number	<u>Credits</u>	College or University		

Spring 2021				
Course Name and Number	<u>Credits</u>	<u>College or University</u>		

Summer 2021				
Course Name and Number	<u>Credits</u>	<u>College or University</u>		

DENTAL HYGIENE ADMISSIONS COURSEWORK CHECKLIST

1. SCIENCE COURSES COMPLETED OR IN PROGRESS. 2 SCIENCE REPEATS WILL BE CONSIDERED.

REQUIRED	Course Name and Number	Qtr/Sem completed or In progress	Name of College or University	Course Grade	Has course been repeated?
Inorganic Chemistry (Ex: CHEM 161) (Ex: CHEM &121 if at CC)					
Organic Chemistry (Ex: CHEM 162) (Ex: CHEM &122 or &131 if at CC)					
Anatomy & Physiology I (Ex: BIOL 232) (Ex: BIOL &160 if at CC)					
Anatomy & Physiology II (Ex: BIOL 233) (Ex: BIOL &241 if at CC)					
Nutrition (Ex: FNDT 356) (Ex: NUTRI251 or NUTR &101 if at CC)					

2. DENTAL HYGIENE PREREQUISISTE COURSES COMPLETED OR IN PROGRESS:

REQUIRED	Course Name and Number	Qtr/Sem completed or in progress	Name of College or University	Course Grade
Anatomy & Physiology III (Ex: BIOL 234) (Ex: BIOL &242 if at CC)				
Microbiology (Ex: BIOL 235) (Ex: BIOL &260 if at CC)				
Biochemistry (Ex: CHEM 163) (Ex: CHEM &123 if at CC)				
Interpersonal Communication (Ex: CMST 210) (NOT public speaking)				
English (Ex: ENGL 201)				
Psychology (Ex: PSYC 100)				
Sociology (Ex: SOCI 101)				

3. EWU GRADUATION REQUIREMENTS (BACR) COMPLETED OR IN PROGRESS:

REQUIRED	Course Name and Number	Qtr/Sem completed or in progress	Name of College or University	Course Grade
Math (Ex: MATH 107) (Ex: MATH&107 or &146 if at CC)				
English (Ex: ENGL 201) (Ex: ENGL&102 if at CC)				
Humanities (Requires 2)				
Social Science (Requires 2)				
Diversity				
Global Studies				

**AA- DTA degree will satisfy EWU's Math, English, Humanities, Social Science, and Natural Science requirements. If obtaining an AA-DTA degree, you do not need to list those requirements just indicate AA-DTA in those boxes.

I certify the information submitted in this application is complete and accurate to the best of my knowledge. I grant the department of dental hygiene permission, if necessary, to request additional information from previous schools concerning my academic and conduct record. I understand that failure to complete all EWU Breadth Area Core Requirements, Math, English, Humanities, Social Sciences, and Global Studies, Diversity, and dental hygiene prerequisites prior to the fall 2021 entry into the program will result in my acceptance being rescinded.

Signature: _____ Date: _____

Print Name: _____

Verification of Proficiency in Foreign Language

If you are randomly selected for an audit to provide proof of information submitted, you will be notified by email. Please retain all documentation so you can submit documentation upon request.

Section 1 – Applicant completes this section

Applicant Name: ______ EWU Student ID: _____

Section 2 - Please have a community member complete this portion.

This individual must verify that you are proficient in a language other than English. The person completing this proficiency verification must:

- 1. Be fluent in the identified foreign language AND
- 2. Have known the applicant and observed their language skills in the past year AND
- 3. Not be a close family member or friend

I verify that is able to speak, read, and write in at a level that allows common everyday communication.

Please explain your relationship with the applicant and how often you observe the applicant conversing/translating in this language:

Contact information for individual verifying language proficiency			
Name:			
Address:			
Phone Number:			
Printed Name:			
Signature:	Date:		

EWU Student ID: _____

Life Experience Statement:

Provide a brief description in the textbox below explaining a challenge you have experienced and how did you overcome that challenge.

EWU Student ID: _____

Diversity Experience Statement:

Provide a brief description in the textbox below describing your diversity experiences.