



UTAH COLLEGE OF DENTAL HYGIENE™

A DIVISION OF CAREERS UNLIMITED L.L.C.
1176 South 1480 West • Orem, Utah 84058



UCDH IS A DIVISION OF CAREERS UNLIMITED L.L.C.



Guide to the Utah College of Dental Hygiene Application Process
***** IMPORTANT-Please read before completing the application*****

The following materials are included in this application packet:

1. Cover Sheet
2. Guide to the Utah College of Dental Hygiene Program Application Process
3. Application Checklist
4. Observation Verification Form
5. Reference Letter (3 required)
6. Application
7. Other Program Information:
 - Dental Hygiene Program—see college catalog on www.ucdh.edu
 - Dental Hygiene Admission Criteria and Selection –see college catalog on www.ucdh.edu
 - Dental Hygiene Program Goals and Vision –see college catalog on www.ucdh.edu
 - Dental Hygiene Curriculum Information—see college catalog on www.ucdh.edu
 - Dental Hygiene Program Estimated Expenses—see college catalog on www.ucdh.edu

Completion of the Utah College of Dental Hygiene Program application and submitting the information/ required forms properly is the sole responsibility of the applicant. Return all required Utah College of Dental Hygiene application, forms, letters, transcripts, and other applicable application information to:

UCDH Admissions
Utah College of Dental Hygiene
1176 S. 1480 W.
Orem, UT 84058

For complete information or catalog information, please contact the admissions office 801-426-8234 or admissions@ucdh.edu, or visit our website, www.ucdh.edu

Application Process:

You do not have to have all items completed below to send in your application. Your application will not be processed until you have submitted the \$50.00 application fee.

Applicants are required to submit transcript evaluations to admissions@ucdh.edu prior to sending in this application. Please email or mail unofficial versions of your transcripts, from any college you have attended, and include the college name(s) and location(s). Official transcripts are also acceptable for the evaluation.

Applicants are responsible for reviewing the UCDH prerequisite retake policy on our website prior to applying. Applicants that are ineligible due to this policy and apply, will not be issued a refund of their application fee.

During the application process it is imperative you keep in contact with the admissions department. It is your responsibility to make sure all items were received. If you change your contact information or move, please inform the admissions department 801-426-8234 admissions@ucdh.edu. When classes are completed, please send updated transcripts to UCDH.

You should retain copies of the application you submit. If you reapply in the future, information will not be released from any previous application. You will be required to fill out a new application and pay the application fee again.



UCDH BSDH APPLICATION CHECKLIST

	Submit Application for admittance to Utah College of Dental Hygiene at: UCDH Admissions and Records 1176 S. 1480 W. Orem, UT 84058
	Pay a non-refundable \$50.00 Application Fee (U.S. Funds).
	Submit your official high school transcript or copy of your GED certificate. NOTE: Only official transcripts are acceptable. To be considered official, the transcript must be a hard copy and mailed .
	Submit a copy of your high school diploma (can be an unofficial copy).
	Submit your official college transcripts. NOTE: Only official transcripts are acceptable. To be considered official, the transcript must be a printed, hard copy, and mailed directly from the school to UCDH. Transcripts are required for ALL colleges/universities courses you have attended, even if prerequisites were not taken there. *Applicants are required to submit transcript evaluations to admissions@ucdh.edu prior to sending in this application. Please email or mail unofficial versions of your transcripts, from any college you have attended, and include the college name(s) and location(s). Official transcripts are also acceptable for the evaluation.
	Submit a "Letter of Reference" from an employer. If you are not currently employed, submit a letter from an individual who knows you well. The reference form in this application MUST be submitted.
	Submit a "Letter of Reference" from a college course director who has taught a course you have taken or are currently taking. The reference form in this application MUST be submitted.
	Submit a "Letter of Reference" from someone who knows your moral/ethical character, such as from a religious, community, or volunteer organization representative. The reference form in this application MUST be submitted.
	Complete a minimum requirement of 40 hours of shadowing/observing a dental hygienist or dental office. Fill out the UCDH Shadowing Log and Verification Form.
	Submit your ACT or SAT score if the test was taken. This can be an unofficial report or can be on your high school transcript.
	Once the above items have been submitted, contact the admissions department to make sure the items were received.

Interview Schedule Notification: ALL information must be included in your admissions file to be considered complete. If applicants qualify for an interview, an email invitation will be sent to you. You will be notified if you are accepted into the program. You will also be notified if you are not accepted into the program. No information will be given regarding an applicant's admission status over the phone. Please DO NOT CALL the admission office of the Department of Hygiene to obtain your status. Any, and all changes to established guidelines or deadlines but be verified through email from our office to yours (you must get confirmation from UCDH that the email was received). It is the applicant's responsibility to archive, keep, and track, all correspondence between UCDH and the applicant. UCDH can only speak to the applicant directly about their file.



Dental Hygienist Observing/Shadowing Verification Form

All applicants wishing to increase their consideration for admission to the Utah College of Dental Hygiene should demonstrate familiarity with the dental hygiene profession. A minimum may be established through documented observing (shadowing) of a dental hygienist during his or her workday for a minimum of 40 hours or through dental assisting/dental receptionist (in an office that employs a dental hygienist). This form provides the necessary verification of the observing (shadowing) experience.

Applicant Name: _____

The above named individual has spent _____ hours DH observing/shadowing/dental assisting/dental receptionist in the office/clinic at

Name of Practice

Location of Dental Office

(_____) _____

Telephone Number of Dental Office

Date(s) of Observation/Work (This may be a time period rather than exact dates):

The applicant observed the following procedures:

Printed Name of Dental Hygienist

Date

Signature of Dental Hygiene

**UCDH ADMISSIONS APPLICATION FOR THE JANUARY 2023 START
DATE**

Please send to:
Admissions & Records Office
1176 S 1480 W, Orem UT 84058
Phone: (801) 426-8234 Fax: (801) 224-5437
E-mail: admissions@ucdh.edu
Website: <http://www.ucdh.edu/>

Last Name: _____ **Middle Name:** _____

First Name: _____ **Maiden Name:** _____

Permanent Mailing Address:

City: _____ **State:** _____ **Zip**

Code: _____

Physical Address:

City: _____ **State:** _____ **Zip**

Code: _____

Cell Phone #: _____ **Work Phone #:**

Email Address: _____ **Date of Birth:**

What state are you from? _____

How did you hear about the program?

NOTE: By providing your email and phone number above, you are giving UCDH representatives permission to reach you via email, phone call, or text.

COLLEGE/UNIVERSITIES ATTENDED

Please list all college/universities attended. Official transcripts from each college/university must be sent to the above address.

*Applicants are required to submit transcript evaluations to admissions@ucdh.edu prior to sending in this application. Please email or mail unofficial versions of your transcripts, from any college you have attended, and include the college name(s) and location(s). Official transcripts are also acceptable for the evaluation.

Start/Stop Dates	Name of School	Location
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CURRENT/ANTICIPATED REGISTRATION

*A copy of your registration, or an unofficial transcript, which verifies your current enrollment is required.

Title	Semester Credits	Name of School	Course and
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you been awarded/earned an associate, bachelor's, or master's degree from any college/university in the past? Please list the date, college/university, and type of degree awarded, if applicable.

Will you be awarded/earned a degree from another college/university prior to the start date of May 2022? Please list the date, college/university, and type of degree that will be awarded, if applicable.

CITIZENSHIP ATTESTATION: By signing below, I declare that I am a citizen of the United States.

(Applicants Signature)

(Date)

Applicants Social Security Number (SSN) - -

IF YOU DO NOT HAVE A SOCIAL SECURITY NUMBER, PLEASE CONTACT THE UCDH ADMISSIONS DEPARTMENT BEFORE SUBMITTING YOUR APPLICATION.

(UCDH is currently not accepting applications from foreign nationals, i.e. DACA, F-1, F-2, J1, J2, G series visa's, and other categories not included under U.S. citizenship).

ETHICAL ATTESTATION: I hereby certify that, to the best of my knowledge, the information in this application is true and complete without intent of evasion, false documentation, or misrepresentation.

I understand that if any information, at any time, is submitted to the UCDH Records Office under false pretenses or is not entirely accurate, truthful, is falsified in any way, or misrepresents in any fashion, that this will be sufficient cause and grounds to have my application rejected or revoked. This may also include a revoking of any awarded status by the admissions office and may also include immediate dismissal from the program.

(Applicant's Signature)

(Date)

To complete the application process, please attach your \$50.00 application fee and send, by mail, to:

Utah College of Dental Hygiene
Admissions/Records Office
1176 S 1480 W
Orem, Utah 84058

THIS APPLICATION WILL NOT BE ACCEPTED VIA EMAIL DUE TO FEDERAL PRIVACY LAWS. IF AN APPLICANT NEEDS TO SUBMIT SENSITIVE INFORMATION VIA EMAIL, (I.E. SOCIAL SECURITY NUMBERS, DATE OF BIRTH, PAYMENT INFORMATION, FORMS OF IDENTIFICATION), PLEASE CONTACT THE ADMISSIONS DEPARTMENT TO OBTAIN A SECURE LINK TO UPLOAD DOCUMENTS.