

New Jersey School Of Dental Assisting Inc.

61 Livingston Ave.
New Brunswick, NJ 08901
800-726-2137

[nj dentalassist@att.net](mailto:njdentalassist@att.net)
DO NOT MAIL TO THIS ADDRESS

Mailing Address Only
Administrative Office
15 Wellington Ln.
Lakewood, NJ 08701

939 West Lacey Road
Forked River, NJ 08731
800-726-2137

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Dental Assisting Program

Approved and Regulated by The New Jersey Dept. of Labor and Workforce Development

APPLICATION BASIC DENTAL ASSISTING PROGRAM

Student's Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____ Social Security Number: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____ Date of Birth: _____

Have you ever been convicted of a criminal offense? Yes No Are you of good moral character? Yes No

In case of emergency, whom should we contact? Name: _____ Phone: _____

Location Applying For (Circle): NEW BRUNSWICK FORKED RIVER Class Session Start Date _____

EDUCATIONAL DATA

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: Fresh. Soph. Jr. Sr. Grad. Degree: Yes NO

Do you have a high school diploma or G.E.D.? Yes No Completion date: _____

SCHOOL	NAME AND LOCATION	GRADUATED (Y/N)	MAJOR	GPA
High School				
College				
Other (Specify)				

Subjects of Special Study: _____

Special Training and Skills: _____

EXPERIENCE

Please state briefly why you wish to attend dental assisting school. (You may use the space provided below, or attach a separate piece of paper.)

Please describe any dental office experience you have had. (You may use the space provided below, or attach a separate piece of paper.)

Character References: Give the names of three persons not related to you, whom you have known at least one year.

REFERENCES

NAME	ADDRESS	PHONE	BUSINESS
1.			
2.			
3.			

Include Deposit of \$100 with this form. (This deposit will be refunded only if you are not accepted or class is canceled)

I certify that all the information provided is complete and accurate to the best of my knowledge.

Applicant's Signature: _____ Date: _____

Please mail all applications to the Administrative Office