



**AS DEGREE IN DENTAL HYGIENE
APPLICATION INFORMATION CHECKLIST
AS-DH**

AUGUST ADMISSION
Jan 15 – June 30 by 7:30 p.m.
West Campus

SUBMIT DOCUMENTS TO: Admissions and Student Records Office at any PHSC Campus.

CONTACT: 727 816-3371

IMPORTANT	
APPLYING	Applicants must submit ALL limited access program admission requirements listed below in order to be considered for review. Once an application packet is submitted, it cannot be amended.
INCOMPLETE APPLICATIONS	Students who attempt to submit an incomplete application will not be processed and must reapply to the program and repay the limited access application fee once all requirements have been met.
DEADLINE	Complete applications are due NO LATER THAN 7:30 PM BY THE DEADLINE DATE OF JUNE 30 for August admission. If the application deadline date falls on a day the College is closed, the application will be accepted no later than 7:30 PM on the next business day.
NO RESPONSE/ FAILURE TO ENROLL	Applicants who do not respond to an offer of admission by the date indicated on the acceptance letter or who fail to enroll for the term for which admission is offered must reapply for a future date.

#	INIT	LIMITED ACCESS PROGRAM APPLICATION REQUIREMENTS
1		PHSC application with a \$25 non-refundable fee for new students or a PHSC Readmission application for returning PHSC students not enrolled for more than 3 consecutive terms.
2		AS Degree in Dental Hygiene paper application.
3		Copy of receipt of payment of the \$25 non-refundable limited access application fee payable at college store.
4		Clear, enlarged copy of current driver's license indicating a physical mailing address (PO Box addresses will not be used for residency preference in the selection process). If a driver's license, or equivalent, does not prove Pasco or Hernando County residency, it will be processed as a non-resident (out-of-county) application.
5		Verification form of 16 hours of observation, volunteer, or work experience in dentistry as verified by a dentist or dental hygienist completed within two years prior to the dental hygiene program application submission.
6		Copy of HESI admission exam with a minimum score of 70% taken within the past two years of the application submission. Contact Career and Testing at 727-816-3381 for testing times.
7		Official high school transcript with graduation date indicating receipt of a standard high school diploma or an official transcript of GED scores indicating receipt of a high school equivalency diploma, if not already submitted.
8		Official transcripts from each U.S. College and university attended other than PHSC.
9		Official scores from external agencies as appropriate for prerequisite courses (i.e. AP, CLEP, IB, etc.).
10		Confirmation that any needed course substitutions have been approved by the application deadline date. Transfer Credits: If the course prefix and number of an evaluated transfer course is not equivalent to PHSC's course prefix and number (ex. transfer course does not indicate BSC1085), then you will have to meet with an advisor to complete a course substitution.
11		A cumulative grade point average of 2.0 or higher.
12		Complete the following prerequisite courses with a combined GPA of 2.5 or higher with at least a grade of "C" or higher: BSC1085 Human Anatomy & Physiology I MCB2010 Microbiology CGS1100 Microcomputer Applications BSC1085L Human Anatomy & Physiology I Lab MCB2010L Microbiology Lab CHM1025 Introductory Chemistry (or higher) BSC1086 Human Anatomy & Physiology II PSY1012 Introduction to Psychology CHM1025L Introductory Chemistry Lab (or higher) BSC1086L Human Anatomy & Physiology II Lab SPC2608 Introduction to Public Speaking
13		Signed Application Information Checklist for the AS Degree in Dental Hygiene.

ACKNOWLEDGEMENTS	
14	Graduation: If selected, I understand that I must have both an overall GPA of 2.0 and a PHSC program GPA of 2.0 in order to graduate from the selected program.
15	Tobacco Use: I understand that the use of tobacco at all PHSC campuses is prohibited and that I will refrain from all tobacco use.
16	Orientation Requirement: If selected, BLS for Health Care Providers CPR Certification (PHSC Course NCH0050) taken at PHSC or from a PHSC Training Site due at Orientation.

SELECTION PROCESS

Applicants who meet minimum requirements as of the deadline dates will be ranked based upon prerequisite GPA and overall GPA. Residents of Pasco and Hernando Counties will receive preference over out-of-county residents.

SIGNATURE

I certify that I have read and understand the statements above and that I am submitting all items listed under the Limited Access Program Application Requirements section.

SIGNATURE

PRINT

STUDENT ID

DATE