

Dental Assisting Candidate Selection Form

Student Name _____ SS# _____
 OTC ID _____

In each item 1-11 please circle the box you obtained in the Grade Column and carry points to Points Received Column. Add the total points received.

		Grade Columns				Points Received
#1- 2 below are required testing for you to be considered into the Dental Assisting Program						
1	Bennett	>53 4 points	52-48 3 points	47-40 2 points	39-35 1 point	
2	Wonderlic	>25 4 points	24-22 3 points	21-19 2 points	18-16 1 point	
#3 & 4 circle yes or no						
3	Are you a Missouri Resident	Yes 4 points	No 0 points			
4	Do you live in the OTC district	Yes 4 points	No 0 points			
#5-11 are optional and if completed will add to your overall point score. They are not required for entry into the program.						
5	Job Shadowing (40 hours in General Dentistry)	Yes 2 points	No 0 points			
6	ENG 101	(A) 4 points	(B) 3 points	(C) 2 points		
7	MTH Elective 105 or above	(A) 4 points	(B) 3 points	(C) 2 points		
8	PLS 101 or (HST 120 & HST 130)	(A) 4 points	(B) 3 points	(C) 2 points		
9	Science Elective (4) BCS, BIO, CHEM or PHY	(A) 4 points	(B) 3 points	(C) 2 points		
10	Social Science Elective (3) AGR, ANT, ECO, GRY, HST, PLS, PSY, SOC	(A) 4 points	(B) 3 points	(C) 2 points		
11	Elective any 100 level or above	(A) 4 points	(B) 3 points	(C) 2 points		
Total Points Received (42 points possible)						

Transcripts: HS/GED _____ Date Received _____
 College _____ Date Received _____
 College _____ Date Received _____
 College _____ Date Received _____

Comments: _____

