

**DENTIST: Please mail this form in your envelope to the address below. Please allow 5 business days for delivery. Must be received prior to applicant filing an "Intent to Apply" to the program.**

## **Cape Fear Community College**

---

### **Confidentiality Statement**

As a student applying to the Dental Assisting/Dental Hygiene programs at Cape Fear Community College, I agree to hold all client records, treatment, and conversations as confidential. If client confidentiality is breached in any manner, I understand that I will not be considered for admission in the dental programs.

\_\_\_\_\_  
Date

\_\_\_\_\_  
(signature of student-applicant)

### **CONFIRMATION OF OBSERVATION**

As verification that the observation has been performed and for recommendation for admission to Cape Fear Community College's Dental Assisting/Hygiene program, the dentist under whom the student observed must complete this form. Cape Fear Community College expresses its sincerest gratitude to the dentist and his/her staff for his/her support in allowing prospective students to observe in the dental office, and for taking the time to complete this form

\_\_\_\_\_ with the Student ID Number, \_\_\_\_\_  
[Print name of student]

completed an observation in my office as part of the requirement for admission in the Dental Assisting/Dental Hygiene [check one]

Program[s].

\_\_\_\_\_ for a period of 16 hours with a Dental Assistant (Dental Assisting Applicant)

\_\_\_\_\_ for a period of 6 hours with a Dental Hygienist (Dental Hygiene Applicant)

---

\_\_\_\_\_  
(Print name of Dentist)

\_\_\_\_\_  
(Telephone No.)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(Signature of Dentist)

\_\_\_\_\_  
(date)

Please return this form to the address listed below as soon as the observation has been completed. Questions may be directed to Director of Dental Assisting, Susan Cutler, 910-362-7416, or the Director of Dental Hygiene, Mary Ellen Naylor, 910-362-7193. Thank you again for your time and support.

**Cape Fear Community College  
Attention: Counseling  
411 North Front Street  
Wilmington, NC 28401**