



Student Application

Student Name

Home Phone

Address

Cell Phone

City, State, Zip

E-mail:

How did you hear about us?

Scrub Size: Top- XS S M L XL XXL

**Scrubs generally run big*

Bottoms- XS S M L XL XXL

Sex: M F (needed to order appropriate scrub)

Height: _____

Course Locations: (please check one) *Deadlines are 1 week prior to class start date.

Custom Dental of West OKC

4425 Grant Blvd
Yukon, OK 73099

Custom Dental of Purcell

700 Chandler Rd
Purcell, OK 7300

Custom Dental of Cushing

3200 E. Main St.
Cushing, OK 74023

Custom Dental of Guthrie

2001 S. Division
Guthrie, OK 73044

Please Check then Circle which course you wish to attend:

Friday

Saturday (West OKC Only)

Winter/Spring

Summer

Fall

Course Length: 10 weeks •160 hrs (80 Class/Clinical, 40 on-the-Job, 40 Externship)

Classes will be held at the location chosen above from 8am-5pm on Fridays or Saturdays for 10 weeks from the starting date of course. There will be a 1 hour lunch break from 12pm-1pm in which students need to be back promptly by 1pm to start afternoon clinicals. Students must wear ceil blue scrubs to class & shadow. One pair will be provided and given to student the first day of class. **Students will be required to shadow a half-day shift every week at a Custom Dental location for the on-the-job training portion of this course until the 10 weeks have concluded.** There will be sign-up sheets to best accommodate schedules.

***Minimum down payment of \$1,500 due with application and enrollment contract to reserve a spot in class.**

NEXT PLEASE
→



Tuition and Fees

Tuition **\$3,847** (included Scrubs/Supplies/Equipment) Enrollment Fee **\$150**

Total Cost of Program **\$3,997**

Please initial by payment option you choose:

___ **Fee Option #1:** Pay in full by cash or check with application and receive a **DISCOUNTED** price of only **\$3,697!!**

___ **Fee Option #2:** \$3997 when paying by **Credit Card.**

___ **Fee Option #3:** \$2,000 down payment with application. \$200 due BEFORE class starts every week.

___ **Fee Option #4:** \$1,500 down payment with application. \$250 due BEFORE class starts every week.

Emergency Contact Form

Contact One Name _____
Address _____
Home # _____ Work # _____
Relationship _____

Contact Two Name _____
Address _____
Home # _____ Work # _____
Relationship _____

Contact Three Name _____
Address _____
Home # _____ Work # _____
Relationship _____

Student Signature _____ Date _____

School Official Signature _____ Date _____

For any questions or concerns:
Please contact our **Course Director,**
Mandi Danker (405) 245-2576

**Send COMPLETED 2-page application
and payment to:**
Custom Dental Assisting School, LLC
10800 S. May Ave, Edmond, OK 73025