United Exchange Dental Assisting School Dental Assisting Program Pending approval by the State of Nebraska Department of Education Private Postsecondary Career Schools

ENROLLMENT AGREEMENT		
Student's Name:		
Address:		
City: State: Zip: _		
Home Phone: Cell F	Phone:	
PROGRAM/COURSE DATA: 8-Week Dental Assistant Course Locations: La Vista, NE 8-Week Dental Assistant Course Start Dates: February 28 th , 2023 September 5 th , 2023 May 9 th , 2023 October 31 th , 2023 July 11 th , 2023 January 9 th , 2024 Zoon Lectures are on Tuesday evenings at 5:00pm -8:00pm CST Classes are held on from Saturdays from 8:00am - 5:00pm (1 hour lunch) Student must be at least 18 years of age and have a High School Diploma or GED TYPE OF INSTRUCTION: Total Hours: 288 hours Theory (Classroom +0nline Video Conference) 24 hours Clinical.	REFUND TABLE Student is entitled to upon withdrawal/termination Within first 10% of program After 10% but within first 25% of program After 25% but within first 50% of program After 50% but within first 75% of program After 75% of program 1. If cancellation occurs within seventy-two (enrollment, all monies paid shall be refunded. 2. The official date of termination for refund purp date of recorded at- tendance. All refunds will t 60 days from the date of termination. 3. The student will receive a full refund of tuition school discontinues a course/program within a a student could have reasonably completed it, e provision shall not apply in the event the operation. 4. A full refund is due an individual whose admissi the school. 5. If cancellation occurs after seventy-two (enrollment, but before resident classes begin, a made except a registration fee not to exceed on dollars (\$150.00). 6. Postponement of a starting date, whether at the school or the student, requires a written agreent the student and the school. The agreement m whether the postponement is for the convenient or student and a deadline for the new start date the start date will not be postponed. ADMISSION REQUIREMENTS Multiple for the law of the law of the law	oses is the last be made within fees paid if the period of time except that this school ceases on is denied by 72) hours of refund shall be e hundred fifty e request of the nent signed by nust set forth: ce of the school beyond which
(Payments can be made by Visa/MC/Amex/Disc) Date of deposit:	Students must be at least 18 years old and possess a high school diploma or GED to be admitted into the Dental Assisting Program. Enrollment can take place up until the first day of class, depending on availability. After the first day of class, students are only admitted for the next session. Late Enrollment is not permitted. I HAVE RECEIVED A COPY OF THIS ENROLLMENT AGREEMENT AND A CURRENT SCHOOL CATALOG Volume 1, 11/2022. Student Signature:	
By signing below, the student agrees to pay The United Exchange Dental Assisting School the total stated tuition and fees. The school agrees to provide the occupational training in accordance with the provisions of the Catalog. Payment of all monies due shall be a condition of continuing enrollment. Upon Satisfactory completion of all academic and skill requirements and when all financial obligations to the school have been met the school will award the Certificate of Completion to the student. The student and school understand that this enrollment agreement, WHICH INCLUDES THE REFUND POLICY, may not be amended except in writing signed by both parties. Students not accepted by the school and students who cancel this contract by notifying the school with three business days, but before commencement of classes, are entitled to a full refund of all tuition and fees paid. Students, who withdraw after three business days, but before commencement of classes, are entitled to a full refund of all tuition and fees, which is based on the percentage of contact hours attended, as described in the table below. The refund is based on the last recorded attendance.		

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Dental Assisting Program

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Note - Under supervision, dental assistant students may:

-Learn/practice placing topical local anesthesia, to monitor nitrous oxide, to assist taking X-rays.

-A licensed dentist may delegate to dental assistants only those procedures for which the dentist exercises supervision and assumes full responsibility.

-Training in Radiography/X-ray area must be for dental assisting purposes.

-DANB's Note on Allowable Dental Assisting Functions. In Nebraska - All dental assistants may "Perform infection control and occupational safety procedures".

-The following training is not permitted: Placing or contouring of a final restoration, Scaling of teeth, including subgingival regions and root planing with hand and ultrasonic instruments, Diagnosis and treatment planning, Surgery on hard or soft tissue, Administering of local or general anesthetics, Any other irreversible dental procedure or procedures which require the professional judgment and skill of a licensed dentist, Any intraoral procedure which would lead to the fabrication of any prosthesis, Chemical curettage.

-To perform coronal polishing procedures under the indirect supervision of a licensed dentist in Nebraska, a dental assistant must: Be at least 18 years of age, and graduate from a accredited dental assisting program which includes a coronal polishing course, OR complete one year (1,500 hours minimum) of clinical work experience as a dental assistant and a Nebraska Board-approved course in polishing procedures.