



Dental Assisting
Schools of America

Acworth

5552 Robin Road

Building A

Acworth, GA 30102

678-888-1554

| | |
|-------------------------|--|
| Full Name: | |
| Address: | |
| City, State & Zip: | |
| Phone Number: | |
| Email: | |
| Date of Birth: | |
| Social Security Number: | |
| Gender: | |

| | |
|---|--|
| Do you have your high school diploma or GED? | |
| Last school attended? | |
| Are you a legal United States citizen? | |
| Which month are you interested in attending the Dental Assisting program? | |
| How did you hear about our program? | |



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|---|---|
| Please list your last three jobs and a brief description of each? | |
| Please list your previous schools and education completed. | |
| Please briefly describe why you want to be a dental assistant? | |
| Uniforms: With your tuition, one set of embroidered uniforms is included. Please list your size for a top and bottom. | <u>Sizes: XS, S, M, L, XL, 2XL, 3XL</u> |