



WEST LOS ANGELES COLLEGE  
DEPARTMENT OF DENTAL HYGIENE  
9000 Overland Avenue  
Culver City, California, 90230  
310-287-4464  
[wlaac-healthsci@wlaac.edu](mailto:wlaac-healthsci@wlaac.edu)

## APPLICATION INFORMATION: BACHELOR OF SCIENCE IN DENTAL HYGIENE COMPLETION PROGRAM

*Application Due: Open Rolling Admission*

Thank you for your interest in applying to the West Los Angeles College Bachelor Science in Dental Hygiene Completion Program. The BS Degree Completion Program is designed for the students who have already graduated from the U.S. accredited dental hygiene program and issued or eligible for a dental hygiene license in California

Please complete the following steps to submit the application packet.

### STEP 1: Submit an online application to West Los Angeles College and Obtain Student I.D. #

\*If you are a WLAC student who has not taken a course during the past two semesters, you must submit a new online application. Visit [www.wlaac.edu](http://www.wlaac.edu) and click *Apply* in the upper right-hand corner. Once logged into your CCC Apply account, submit a new application to WLAC.

### STEP 2: Apply for Financial Aid

Complete your FAFSA online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). For more information or assistance, visit <http://www.wlaac.edu/Financial-Aid/> or call 310-287-4532. **It is strongly recommended that all prospective students apply for FAFSA now, so that funds may be available should admission to the program be offered.**

### STEP 3: Order Official Transcripts

Request official transcripts from **all colleges and universities you have attended**, even if the courses taken are irrelevant to the program. Only official transcripts will be accepted. You will need to submit two sets of official transcripts:

- One set of all official transcripts to WLAC Admissions and Records (from college to college only---no walk-in transcripts will be accepted).
- One set of all **OFFICIAL ELECTRONIC TRANSCRIPTS** to the Health Science Division: [wlaac-healthsci@laccd.edu](mailto:wlaac-healthsci@laccd.edu)
  - If you attend any colleges of Los Angeles Community College District (LACCD), unofficial transcripts from LACCD colleges will be accepted by the Health Sciences office.
  - No high school transcripts are required.

### STEP 4: Fill Out WLAC Dental Hygiene Application Forms

Fill out the application form completely and be sure to check each required document that you are submitting. Your signature indicates that you have completed and turned in all required information accurately and honestly.

### STEP 5: Write a Personal Statement

Submit a minimum 2-page paper of your personal statement using word processing in APA style Format.

#### STEP 6: Provide a copy of RDH License

Submit a copy of the current Registered Dental Hygienist (RDH) License or Registered Dental Hygienist in Alternative Practice (RDHAP) license or Verification Letter from the DH program for recent graduation within 6 months.

#### STEP 7: Course Descriptions (if applicable)

If the applicant attended another college/university (outside of the LACC District), please submit copies of course descriptions from the college/university attended and included in the application packet. DO NOT CUT and PASTE the descriptions into a Word document. The course descriptions must be from the college catalog.

#### STEP 8: Submit the application packet ASAP

Submit the completed application packet as soon as possible. Send application via email with ALL the required documents attached to the Health Science Division: [wlac-healthsci@laccd.edu](mailto:wlac-healthsci@laccd.edu). We accept the application all the time and we will notify you when you can start the program.

#### STEP 9: Meet with the WLAC Dental Hygiene Counselor

Once your application packet is reviewed and accepted, make an appointment to meet a counselor at WLAC. If you attend another college/university (outside of the LACC District), a college counselor to determine course equivalency for all courses. Complete a student education plan (SEP).

#### STEP 10: Complete Specific Prerequisite Courses for BS Degree in Dental Hygiene Courses.

The following prerequisite courses are required before taking upper division GE courses. The courses offered at WLAC are indicated inside the parentheses.

- Critical Thinking (English 103)
- Statistics (Math 227)
  - Cultural Anthropology (Anthropology 102) ---- only if you are taking Anthropology 320 as upper division GE
  - Ethnic Studies ----- If CSU General Education certificate requires one.

#### STEP 11: Complete Required Courses for IGETC General Education Certification or CSU General Education Courses.

There are two options for the GE curriculum. The Intersegmental General Education Transfer Curriculum (IGETC) or California State University GE Breadth (CSU GE). The current list of required courses for [IGETC](#) and [CSU](#) can be obtained from the college counseling office. All required courses should be completed before graduation.

West Los Angeles College  
Department of Dental Hygiene  
9000 Overland Ave.  
Culver City, CA 90230  
WLAC-HealthSci@LACCD.EDU

Bachelor of Science in Dental Hygiene Degree Completion Admissions Application:

You are urged to give careful consideration to each question on this form. This form must be completed in its entirety for consideration by the committee.

1. LACCD STUDENT ID# \_\_\_\_\_

2. Name

\_\_\_\_\_  
MAIDEN OR FORMER LAST FIRST MIDDLE NAME

3. Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Ph. \_\_\_\_\_

4. E-mail Address \_\_\_\_\_

5. Mailing Address

\_\_\_\_\_  
NUMBER & STREET CITY STATE ZIP

6. Birthdate (mm/dd/yyyy) \_\_\_\_\_ Age \_\_\_\_\_ Pronouns \_\_\_\_\_

7. Race/Ethnicity Categories (This information is used for accreditation statistical data and is optional.)

Check One:

- |   |   |
|---|---|
| <input type="checkbox"/> Hispanic or Latino (Any Race)                                      | <input type="checkbox"/> Black or African American (not Hispanic or Latino) |
| <input type="checkbox"/> White (Non-Hispanic or Latino)                                     | <input type="checkbox"/> Asian (not Hispanic or Latino)                     |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander (Non-Hispanic or Latino) | <input type="checkbox"/> Two or more races (not Hispanic or Latino)         |
| <input type="checkbox"/> Unknown  | <input type="checkbox"/> Do not want to disclose                            |

8. Which Dental Hygiene program did you graduate from?

\_\_\_\_\_

9. Please check all that apply:

- |   |  |
|---|--|
| <input type="checkbox"/> Military Veteran                 | <input type="checkbox"/> Foster Youth          |
| <input type="checkbox"/> EOP&S                            | <input type="checkbox"/> CALWORKS              |
| <input type="checkbox"/> First generation college student | <input type="checkbox"/> International Student |

10. Did you complete the General Education Plan?

☐ IGETC Breadth

Verification Date: \_\_\_\_\_

☐ CSU Breadth

Verification Date \_\_\_\_\_

List **ALL COLLEGES/Universities** you have attended; list most recent first. Enter Grade Point information for each college attended. This is located on the college transcript.

College	Start Date	End Date	Total # of units completed at the institution	Degree Earned at the institution	Overall GPA	

**Courses required during the program:** Indicate when and where each course was taken and semester or quarter unit value earned. **List any** prerequisites courses that you have already taken. These are not required for the program acceptance, but highly recommended to start them before the program starts.

**Prerequisite Courses before Taking Some Upper Division DH Courses**

WLAC Course Name and Number	College	Course Name & Number (If different)	Units semester/quarter	Grade	Semester and Year Completed (I/P for In-Progress)	
English 103 (Critical Thinking)						
Math 227 (Statistics)						

**License Information:**

California RDH License # \_\_\_\_\_ Issuing State \_\_\_\_\_ Licensed since (year) \_\_\_\_\_

RDHAP License # \_\_\_\_\_ Issuing State \_\_\_\_\_ Licensed since (year) \_\_\_\_\_

RDA License # \_\_\_\_\_ Issuing State \_\_\_\_\_ Licensed Since (Year) \_\_\_\_\_

## APPLICATION AGREEMENT

BEFORE Signing the Application Agreement Form, please read the following

### Responsibility

- In addition to the \$46 per unit enrollment fee, there is an additional \$84 fee per unit for upper division coursework, bringing the total cost per unit to **\$130** for California resident students. For a complete list of student fees, including non-resident, international, health fees, and Associated Student Organization (ASO), please refer to the college catalog.
- Students will also need to purchase required textbooks, access to a computer and internet access.
- Upon successful acceptance into the program, the accepted students will be notified immediately to connect with a WLAC counselor.

### Complete Application

- Please do not leave any space blank in the application form. If not applicable, indicate N/A.
- Submit the completed application packet as soon as possible. Send application via email with ALL the required documents attached to the Health Science Division: [wlac-healthsci@laccd.edu](mailto:wlac-healthsci@laccd.edu).

### Dishonesty

In accordance with LACCD Board Rule and Regulations, 9803.12, **DISHONESTY** is prohibited and will not be tolerated. Dishonesty, such as cheating, or knowingly furnishing false information to the college will result in suspending the application. The applicant will be ineligible to apply to the WLAC Dental Hygiene Bachelor Completion Program in future years.

By signing below, I verify that the information contained in my application packet is accurate and completed to the best of my ability and honesty.

Student Name (Print): \_\_\_\_\_ LACCD Student # \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_