

H. COUNCILL TRENHOLM STATE TECHNICAL COLLEGE

1225 Air Base Boulevard * Montgomery, Alabama 36108 * Phone (334) 420-4200

ATTENTION: Dental Assisting Department

Please give the following information concerning
Ms./Miss/Mrs./Mr.

_____ Date of Physical Exam: _____
Height: _____ Weight: _____ HIV Screening Date and Results: _____
CBC Date and Results: _____ Hepatitis Screening Date and Results: _____
VDRL Date and Results: _____ Urinalysis Date and Results: _____
TB Skin Test Results (must be current up to two months prior to admission): Please give the date of test and
indicate whether the test is a one-step or a two-step: _____

Immunizations:

MMR #2 _____
Tetanus _____
*Hepatitis B _____

(Signature of person reading test)

Date: _____
Date: _____
Injection #1 Date: _____
Injection #2 Date: _____
Injection #3 Date: _____

*If student does not receive a Hepatitis immunization the student must sign a release form stating that he/she refused the immunizations.

Is this person on any medication(s) that would hinder his/her from performing his/her job or that would pose a threat to the health and safety of others? Yes _____ No _____

If yes, please explain: _____

In your opinion, is this person physically, and mentally able to perform duties in his/her field? Yes _____ No _____
If no, please explain: _____

Please make any further comment(s) and/or recommendation(s) and return this form to the above address.

Signature of Physician

Print Name:
Address:
Phone:

I am applying for admission to the DENTAL ASSISTING Program at H. Councill Trenholm State Technical College. I authorize you to send to the college all information requested.

Signature of Student

It is the official policy of the Alabama Department of Postsecondary Education, including all Postsecondary institutions under the control of the Alabama State Board of Education, that no persons shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program, activity or employment.

Attach additional pages if needed.