

DENTAL ASSISTING PROGRAM



APPLICATION PACKET 2026-2027

Submit information to:
WESTERN TECHNOLOGY CENTER
c/o Karla Wedel-School Counselor
P.O. Box 1469, 621 Sooner Drive
Burns Flat, OK 73624
Ph. 580.562.3181 x. 280
kwedel@westtech.edu

Program Director
Kelly Pease
2605 E. Main
Weatherford, OK 73096
Ph. 580.772.0294 x.125
kpease@westtech.edu

Date _____

Current Mailing Address:

(Please give mailing address)

Email Address: _____

Phone Number: _____

Mobile Number: _____

Physical Address:

(If different from above)

(City) (State) (Zip)

Questions: Contact
Kelly Pease, BS, CDA, CPFDA
Dental Assisting Program Director
2605 E. Main
Weatherford, OK 73096
580.772.0294 x. 125
[**kpease@westtech.edu**](mailto:kpease@westtech.edu)

STEP-BY-STEP APPLICATION PROCESS

Dental Assisting (DA) Program

Step 1	Dental Application Packet. Available at WTC from the counselor or instructor at the Weatherford campus. 580-562-3181 ext. 280 ▪ Cost ▪ Documentation ▪ 1050 Program Hours, 300 hours at offsite clinical rotation ▪ Responsible for own Transportation
Step 2	Testing Registration: Contact WTC counselor to set up testing date 580-562-3181 ext. 280 Assessment Test: All assessments are given at the Burns Flat Campus and require a \$10.00 fee.
Step 3	Submit Application: Western Technology Center c/o Karla Wedel, School Counselor P.O. Box 1469, 621 Sooner Dr. Burns Flat, OK 73624 Required Documentation: ▪ Official copy of High School Diploma/Transcript or GED ▪ Employment record (if applicable) ▪ Official college transcript (if applicable) ▪ Proof of Observation (pg.10) ▪ Immunization record ▪ Certified Background Check \$51.95 – FOLLOW LINK listed below https://wtcdental.quickapp.pro/apply/applicant/new/26675 page 6 is an image of what the link will look like after clicked ▪ TB results (Health Dept.) Bring Completed Application on the day of assessment testing
Step 4	Financial Aid: FAFSA – Free Application for Federal Student Aid. Apply on-line at www.studentaid.gov. Western Technology Center School Code: 010762. Contact the Financial Aid Office for additional information: Dana Ellis 580-562-3181 Ext 279 dellis@westtech.edu
Step 5	First Day of Class: If you are not present on the first day of class and have not notified the faculty of your inability to be present, your position will be filled from the alternate list of applicants. Notification: The application needs to be at the Burns Flat campus with the school counselor no later than Friday, June 26, 2026. The selection process will begin on Monday, June 29, 2026. The admission committee will review the applications and the top six applicants with the highest number of points will be admitted into the program. All applicants that complete the application process will be notified by letter or phone call concerning their status; accepted, not accepted, or on the alternate list.



WESTERN TECHNOLOGY CENTER
DENTAL ASSISTING PROGRAM
2605 EAST MAIN, DENTAL BLDG.
WEATHERFORD, OK 73096

GENERAL INFORMATION

Fully complete application and provide required documentation. Failure to fully complete application will result in no consideration for admission to the Dental Assisting Program.

The Dental Assisting Program is an accredited program by the:

Commission on Dental Accreditation 211 E. Chicago Ave. Chicago, IL 60611

www.ada.org/coda

ENROLLMENT DATES:

Applications for the 2026-2027 class will be accepted beginning now until June 26, 2026.

PRE-ENTRANCE TESTS:

You must take Western Technology Center's pre-entrance tests. If you cannot test on the date assigned to you, you must notify us before the test.

SELECTION PROCESS:

The selection of applicants is on a point system. You will receive points for employment history, completed specified courses in science subjects, selecting current certifications, dental observation hours and test scores. The applicants receiving the most points are accepted into the program. **Six students will be accepted annually, and the next 6 applicants go on an alternate list.** If anyone drops from the class before class starts in August, the first alternate of applicants is notified to fill that spot. All applicants that complete the application process are notified by letter concerning their status; accepted, not accepted, or on the alternate list.

SELECTION COMMITTEE: Jeff Lewellen; Assistant Superintendent - Director of Instruction, Kelly Pease; Program Director, and Karla Wedel; School Counselor.

LENGTH OF THE COURSE:

The course is ten months long from August until May 1050 hour course; 300 hours will include clinical site rotations in dental offices that are in Western Oklahoma. Classes will follow the Western Technology Centers school calendar.

FINANCIAL ASSISTANCE

Western Technology Center is approved for benefits from: Department of Rehabilitative Services, WIOA, BIA Tribal Education Assistance, Pell Grants, OTAG and Oklahoma's Promise for financial assistance. For specific information, please contact the Financial Aid Officer, Burns Flat campus, 580-562-3181 ext. 279.

NOTE:

We only keep applications on file for the year in which you applied. If you are not accepted for the school year that you applied for and want to be considered for the next class, you will need to reapply.

NOTICE OF NON-DISCRIMINATION

WESTERN TECHNOLOGY CENTER DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, AGE, VETERAN STATUS, OR RELIGION.

The following people have been designated as WTC Compliance Officers to handle inquiries regarding the non-discrimination policies:

Ms. Karla Wedel
504 Coordinator
 P.O. Box 1469
 621 Sooner Drive
 Burns Flat, OK 73624
 580-562-3181 x280
kwedel@westtech.edu

Mr. Jeff Lewallen
Title IX Coordinator
 P.O. Box 1469
 621 Sooner Drive
 Burns Flat, OK 73624
 580-562-3181 x213
jlewallen@westtech.edu

Ms. Serenna Hitter
Title IX Coordinator
 P.O. Box 1469
 621 Sooner Drive
 Burns Flat, OK, 73624
 580-562-3181 x294
serennah@westtech.edu

Ms. Jaime Partain
Title IX Coordinator
 2002 NE Hwy 66
 Sayre, OK 73662
 580-928-2097
jpartain@westtech.edu

PROGRAM GOALS:

1. To continue good communications internally and externally within the industry.
2. To provide the student with the necessary skills, knowledge, attitudes and professionalism to be successfully employed in the dental health care field or related professions.
3. To continue developing effective partnerships within the dental communities of the dental assisting students.
4. Learning skills to provide excellent patient care, safe pt. care including awareness of infectious disease prevention, pt. education.
5. To practice as a Permitted Dental Assistant and gain dental experience at selected clinic site during 2nd semester (students are required to transport to a clinic site for the last 6 weeks) Refer to page 12 to make sure you meet all of Oklahoma Board of Dentistry requirements to attain Dental Dental Assisting Permit. This Permit is a must before you are able to go to clinical rotations.

EMPLOYMENT OPPORTUNITIES:

- Dental Receptionist
- Dental Assistant
- Dental Supply Sales Representative
 - Sterilization Assistant
- Oral & Maxillofacial Surgeon Assistant

COLLEGE OPPORTUNITIES:

- Dental Hygienist
 - Dentist
- Dental Specialist



Welcome

Welcome to Western Technology Center Dental Assisting check portal. Please answer all questions and check your answers before moving to the next section.

Have you already started? Pick up where you left off.

[Resume Application](#)

APPLICANT INFO

Please answer all questions and check your answer for accuracy.

Name *

Email *

DOB *

SSN *

<https://wtcdental.quickapp.pro/apply/applicant/new/26675>

2026-2027 Dental Assisting Costs

Costs are subject to change

	Pay to WTC	Vendor	Amount	Totals
1st SEMESTER				
Tuition:				
Tuition for 525 hrs. In-District Student	\$ 1,312.50			
Tuition for 525 hrs. Out-of-District Student	\$ 2,625.00			
Books:				
Modern Dental Assisting	\$ 256.00			
Student Fees:				
Health Career Student Accident Insurance	\$ 15.00			
Equipment:				
Goggles	\$ 15.00			
Supplies: <i>(Purchased by student on their own)</i>			Approx.	
12-pack Sharpies Ultra Fine (Assorted colors)			\$ 18.00	
12-pack Sharpies fine point (Assorted colors)			\$ 18.00	
3-Highlighters			\$ 3.00	
Index Cards 3x5			\$ 2.00	
2-1" binders (3 ring binders)			\$ 1.50	
1-3" binder (3-ring binder)			\$ 1.50	
3 boxes Kleenex			\$ 6.00	
5-Sets of Scrubs (2 sets must be solid black)			\$ 300.00	
Lab Jacket			\$ 35.00	
Undershirts (if needed)			\$ 25.00	
New tennis shoes (for clinic use only)			\$ 75.00	
Total for 1st SEMESTER In-District Student				\$ 2,083.50
Total for 1st SEMESTER Out-of-District Student				\$ 3,396.00
2nd SEMESTER				
Tuition:				
Tuition for 525 hrs. In-District Student	\$ 1,312.50			
Tuition for 525 hrs. Out-of-District Student	\$ 2,625.00			
Student Licensures & Fees <i>(Paid for by student)</i>				
Okla. Dentistry Licensures Due January 1		Ok. Brd. Dent.	\$ 50.00	
Okla. Dentistry Licensures Due May 10		Ok. Brd. Dent.	\$ 40.00	
Certified Dental Assist. Testing Due March 25				
Infection Control			\$ 270.00	
General Chairside			\$ 270.00	
Radiation Health & Safety			\$ 270.00	
Total for 2nd SEMESTER In-District Student				\$ 2,212.50
Total for 2nd SEMESTER Out-of-District Student				\$ 3,525.00
Grand Total for Year In-District Student				\$4,296.00
Grand Total for Year Out-of-District Student				\$6,921.00
TOTAL PAID TO WTC In-District Student	\$ 2,911.00			
TOTAL PAID TO WTC Out-of-District Student	\$ 5,536.00			

You can receive points for the following:

COMPLETED STUDY IN THE HEALTH FIELD

- A. Completed short-term class and/or certificate (8 to 30 hours) = 1 point each
Example: CPR/First Aid
- B. Completed intermediate-term class and/or certificate (31 to 80 hours) = 2 points each
Example: CNA, CMA, HHA
- C. Completed long-term class and/or certificate (81-200 hours or over) = 3 points each
Example: EMT, HCC
- D. Verified employment in a dental office or the dental field = 4 points for each year of experience
- E. Any Board of Dentistry certificates you have obtained = 5 points each

You **must provide a CURRENT** certificate for any of the above points.

COLLEGE COURSES 2 POINTS EACH

Anatomy & Physiology

Nutrition

General or Developmental Psychology

Microbiology

Medical Terminology

Any course that is related to science or health.

You **must provide** proof of having completed the course (an official transcript) and received at least a “C” in the course before receiving points.

Other certificates, courses, community activities, high school achievements and life-long learning experiences will be reviewed individually by the Dental Assisting faculty.

Name: _____

DENTAL ASSISTING APPLICATION RUBRIC**# Of Points**

- _____ Study in the health field/**Current** Certifications in Health Field: 1-3 points. (Maximum # of points 10), CNA, CPR, First Aid, EMT, HHA, CMA, HCC,
- _____ Documentation of tour and meeting with Mrs. Pease, Dental Assisting Program Director. (15 points)
- _____ Observation: 3-points for 1-4 hours, 5-points for 5-9 hours, 7-points for 10-14 hours, 15 points for anything over 14 hours. (Maximum of 15 points)
- _____ Work Keys Curriculum Placement Test score in Applied Math (Maximum of 6 points)
- _____ Work Keys Curriculum Placement Test score in Work-Place Documents (Maximum of 6 points)
- _____ Current Dental Certificates: any **current** Board of Dentistry Certifications = 5 points; (Maximum # of 10 points).
- _____ **Official** Copy of College Transcript: 2 points per course with a C or better grade/ Anatomy & Physiology, Nutrition, General or Developmental Psychology, Microbiology, or Medical Terminology, etc.... (Maximum # of 15 points)
- _____ Certified Background Check: (8 points)
- _____ **Official** Copy of High School Transcript/Diploma or GED: (5 points)
- _____ Immunization Record: (5 points)
- _____ TB Test Results: (5 points)

_____ **TOTAL POINTS Maximum Points Possible: 100**

Deadline will be June 26, 2026.

We will send a letter and a phone call of confirmation if you have been accepted into the program after June 29, 2026. We will also send information about financial assistance.

Kelly Pease, BS, CDA, CPFDA
 Dental Assisting Program Director
 2605 E. Main
 Weatherford, OK 73096
 580.772.0294 x. 125
kpease@westtech.edu



Dental Assisting Pre-Entrance Observation Form

This is to verify that _____
(Print Name of Applicant)

DATE	OFFICE	TIME	SIGNATURE OF STAFF

(Signature of Applicant)

(Date)

3 points – 1 to 4 hours

5 points – 5 to 9 hours

7 points – 10 to 14 hours

15 points – for anything over 14



**Tour of DA Facility
&
Meeting with Instructor**

Name: _____ Date: _____

Address: _____

City: _____ State: _____

Phone #: _____ E-Mail: _____

This letter is to acknowledge that the above person has toured the dental facility and will gain points for the application of the Dental Assisting Program 2026-2027 class.

Thank you,

Kelly Pease, BS, CDA, CPFDA
Dental Assisting Program Director
2605 E. Main
Weatherford, OK 73096
www.westtech.edu
580.772.0294 ext. 125

Oklahoma Board of Dentistry Information to attain Dental Assistant Permit:

www.ok.gov/dentistry

- They will do a background check nationwide, prior to receiving a permit of any kind.
- Your information is then shared with IRS for tax purposes.
- A Tax ID# and Employee Authorization Card are not the same.
- If you are not a citizen you will need to verify qualified alien status: passport, green card, etc. something to prove you are lawfully present in the United States.
- Option – 2 Verifying Qualified Alien Status- Please submit a copy of your passport, green card, etc. with the Dental Assisting Permit Application.

If you have any questions, please contact “Jeff Puckett (405) 522-4844

Here is the link to the Oklahoma Board of Dentistry: www.ok.gov/dentistry

Please note you **CANNOT** fill out both affidavits. All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Board of Dentistry are required by the provisions of 56 O.S. Supp. 2207 § 71, to provide the Board with verification of **lawful** presence in the United States by executing one of the Affidavits below before Notary Public or other Officer authorized to notarize Affidavits under State law. The Board’s licensing offices are staffed with notaries who are available to provide notary service at no cost to applicants. Option1- Verification of Citizenship Affidavit of: (Applicant’s Name) STATE OF:) COUNTY OF:), of lawful age, being duly sworn, upon oath states, under penalty of perjury, as follows: I am a United States Citizen. (Signature of Applicant) Subscribed and sworn to or affirmed before me this day of, 20 By (Applicant) My Commission Expires: (Notary) (SEAL) Option 2- Verifying Qualified Alien Status – Please submit a copy of your passport, green card, etc. with this application! Affidavit of: (Applicant’s Name) STATE OF:) COUNTY OF:), of lawful age, being duly sworn, upon oath states, under penalty of perjury, as follows: I am a qualified alien under Federal Immigration and Naturalization Act, and I am lawfully present in the United States.

DAND-Dental Assisting National Board- National Licensing Board

- Yes, you can sit for a national licensing exam without a SSN#.
- You will need to complete that area with 000-00-000 and they will give you a number to track you with.
- There is a question on the application for felony convictions and sentencing.
- **It is up to each state to follow through with background checks.**
 - Oklahoma requires documentation of lawful presence in the United States.