Dental Hygiene Clinical Observation Form

Office Superv	isor:			
clinical setting team. Your co	g observing the functions a dental	lege. Applicant hygienist perfo nt to observe v	is an applicant for the sare required to spend 3 hours in a orms as a member of the dental care will assist us in providing qualified and	
The applicant	should satisfy the following object	ctives:		
Applicant observed the hygienist during patient treatment				
	Applicant received a tour of the dental office and introduction to the roles and responsibilities of all members of the dental team			
I have supervi objectives	ised the candidate listed above an	d they have co	mpleted the established	
Comments:				
(Supervisor	's Signature)	-	(Date of Observation)	
(Gupervisor	o olgitatoro)		(Bate of Observation)	
(Supervisor	's Printed Name)	-	Name and Address of Dental Clinic:	
(Student Si	gnature)	=	(Student ID)	

Fax form to 850- 484-2375