



# **National Denturist Association**

## ***Denturist Education Certification***

### ***Application Form***

*(8/14/13)*

## **Certification Overview:**

The National Denturist Association adopted the Denturist Program Certification Process in 2013 to establish a framework by which programs could be evaluated to ensure that students graduating from these programs would be prepared to practice within the baseline competencies and scope of practice currently established by the International Federation of Denturists (IFD) and those established by the IFD on March 19, 1995. The Application will be reviewed by the National Denturist Association Education Committee. The Committee has signed Nondisclosure/confidentiality agreement related to the intellectual property submitted. An example of that agreement is available upon request.

## **Application Process:**

The applicant will provide five (5) identical binders containing the requested information to the National Denturist Association. National Denturist Association Staff will provide an initial review for completeness. An application will be deemed complete when all items requested within the application are provided. Failure to complete ALL of the requested items and submit the Application Fee will result in notice being sent as to which area is deficient. Applicant will have sixty (60) days from the notice to provide requested information. If the requested information is not received in the time frame allowed, the entire submittal will be returned to the applicant (Less one binder for our record). An additional Submission Fee will be charged if the applicant resubmits.

After the application is deemed to be complete by National Denturist Association staff, the binders will be sent to the Education Committee. The Education Committee will review the binders and submit further questions regarding the program within thirty (30) days of receiving the binders (Please note that deficiencies found by the Education Committee will increase the review time). After deficient items have been satisfactorily addressed and the Education Committee has reviewed the information, they will prepare a recommendation for an approval at the next full board meeting. This meeting will be conducted in Executive session and may be deemed a Special Meeting. Once a decision has been made, the program will be notified in writing within thirty (30) days. All but one binder will be returned to the programs representative, with the remaining binder kept at the Executive office. This binder will be used in the future for comparison for renewal.

## Request for Certification

### **Fees:**

The fees for this application are as follows:

Submission Fee: \$500.00

Initial approval (Certification): \$3000.00

Yearly renewal (renewal Certification): \$1750.00

The submission fee is to be paid at time of submission of the five binders. Once certification has been reached, the program will be notified and an invoice will be mailed out. Certification is not complete until the Certification fee has been paid. The National Denturist Association will mail out an official document of Certification within 10 business days of receiving the Certification Fee.

### **Renewals:**

Renewals are due annually thirty (30) days prior to the anniversary date of approval. If there has been no substantial change in the program (less than 25% of the documentation has changed), then a single binder may be supplied to the National Denturist Association with the renewal fee. A thirty day grace period will be allowed to complete the renewal process. If the program has undergone a substantial change (more than 25% of the submitted documentation change), then a full submittal with the Submission Fee and the five binders will be required and the initial process will be followed. Failure to renew this application will result in approval being rescinded. Notification letters will be sent immediately to the program contact, regulated states and the International Federation of Denturists that this education program is no longer certified by the National Denturist Association immediately.

# 1. School Information:

**NAME OF SCHOOL:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

Street Address

\_\_\_\_\_  
City State Zip + 4

\_\_\_\_\_  
County ( ) Telephone ( ) Fax

\_\_\_\_\_  
E-mail Web Site Address

**MAILING ADDRESS:**  
(if different) \_\_\_\_\_

Street Address

\_\_\_\_\_  
City State Zip + 4

**CONTACT PERSON:** \_\_\_\_\_

Name Telephone

\_\_\_\_\_  
E-mail

The School is a Member of the National Denturist Association in good standing.

## FEES ENCLOSED

Submission Fee (\$500) \_\_\_\_\_

<b><u>FOR NDA STAFF USE ONLY</u></b>	
Date Application Filed:	_____
Date Assigned to the Education Committee:	_____
Date of Approval:	_____
Date Effective:	_____

## 2. Ownership Information:

**School Name:** \_\_\_\_\_

**Individual Owner/Partner/Member Information (Attach additional copies for multiple Owner/Partner/Members). Include a resume showing education and work experience for each owner Owner/Partner/Members.**

Name		Date of Birth
Home Address		Home Phone Number <i>(include area code)</i>
City	State	Zip + 4
_____ Percent of Ownership		<input type="checkbox"/> Member, Board of Directors <input type="checkbox"/> General Partner
List the names and locations of other private postsecondary schools owned and/or operated by you:		

**If you answer “Yes” to any of the following questions, please attach an explanation.**

1. Are there any legal or administrative actions pending against the school, any of the owners (including yourself), officers, administrators, or instructors, by any federal, state, local law enforcement or other regulatory agency?  Yes    No
2. Has the school, an owner, person in control, director, instructor or officer of the school been found in any criminal, civil, or administrative proceeding to have violated any law regarding the obtaining, maintenance, or disbursement of state or federal loan or grant funds, or any other law substantially related to the operation of the school?  Yes    No
3. Does the school, or an owner, person in control, director, or officer of the school have unpaid financial liabilities involving the improper acquisition, use expenditure, or refund of state or federal financial aid funds?  Yes    No
4. Has the owner, person in control, director, or officer of the school served as a director or officer of a school that is now closed?  Yes    No
5. Has the owner, person in control, director, or officer of the school had the capacity, directly or indirectly, to influence the management, policies, and conduct of a school that is now closed?  Yes    No
6. Does the owner, person in control, director, or officer of the school owe full refunds or compensation for actual damage to students resulting from closure of a school?  Yes    No
7. Have you ever been convicted of a crime other than a minor traffic violation?  Yes    No

**I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

Signature

Date

### 3. Admissions Requirements

**School Name:** \_\_\_\_\_

**Program Name:** \_\_\_\_\_

**1. Applicants must have (*identify all that apply*):**

- a.  High School Graduate    OR     GED    OR     Other \_\_\_\_\_
- b. Minimum age at time of enrollment: \_\_\_\_\_
- c.  Medical Exam                       Criminal History                       Drug Screening  
    If any, who will pay the cost to obtain this information?
- d.  Ability to Benefit or Capacity to Complete Exam (*if used, attach a copy or reference on where exam can be obtained or taken*)
- e.  Other Entrance Exam (*if used, submit a copy and minimum score required*)

**2. Please list any additional entrance requirements:**

**3. For each admissions requirement identified, describe the documentation required as proof that the requirement is met:**

**4. For each piece of documentation required to verify admissions eligibility, describe the evaluation criteria used to determine whether or not the applicant has met the requirement:**

**5. If an ability to benefit test is used, describe the criteria used to determine whether to administer the test, and the minimum acceptable score:**

**6. Describe your identity verification policy:**

**7. Is credit given for previous learning or previously earned hours? If yes, what is your process and criteria for evaluating previous learning experiences or transfer hours? Describe how you intend to ensure that minimum baseline competencies have been met:**

**8. Describe your policy and process for notifying students of the results of the admissions process:**

**9. Describe your policy and process for students who are denied admission and wish to reapply:**

**10. Attach a blank copy of your admissions application:**

## 4. Program Information

**School Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Provide the following items using the checklist as your table of contents. Provide page numbers for where these items appear.

		<b>CHECKLIST FOR PROGRAM INFORMATION</b>	<b>Page #</b>
<input type="checkbox"/>	1.	Names and positions of administrative and instructional staff.	
<input type="checkbox"/>	2.	Provide minimum requirements for administrative and instructional staff and process of evaluation. Provide resumes for administrative and instructional staff.	
<input type="checkbox"/>	3.	Names and contact information for all licensing and accrediting institutions that have governing authority over the school. Current Licensure or Accreditation in the State where based. Provide documentation for any States that recognize the program.	
<input type="checkbox"/>	4.	School's mission statement.	
<input type="checkbox"/>	5.	The number of clock hours and credit hours (if applicable) of instruction in the program and the length of time (Minimum 2 full years), in weeks or months, expected for completion. If a program is lesson based, the number of lessons comprising the program must also be included.	
<input type="checkbox"/>	6.	Program outline showing the course name, number of credits, clinical hours, and laboratory hours.	
<input type="checkbox"/>	7.	Describe the minimum number of patients and prosthetics produced.	
<input type="checkbox"/>	8.	A description of the school's physical facilities, equipment, and instructional resources available for student use, including a description of any library or media resources available to the student, and the policies governing use of these resources.	
<input type="checkbox"/>	9.	A school calendar indicating enrollment / registration dates, start and end dates for each program, holidays, other days school is not in session, and any other important dates that are reasonably likely to affect the decision of a potential student to enroll.	
<input type="checkbox"/>	10.	Schedule of enrollment fees by program showing cost of tuition, registration fee, other instructional fees for books, supplies, laboratory time, etc., and any other costs for which the student may be responsible.	

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		<b>CHECKLIST FOR PROGRAM INFORMATION</b>	<b>Page #</b>
<input type="checkbox"/>	11.	Overall grading system, including rating scale, point system, or other rubric used, with definitions of performance indicated by rating levels or ranges.	
<input type="checkbox"/>	12.	All institutions with which the school has an articulation agreement, if applicable.	
<input type="checkbox"/>	13.	Academic satisfactory progress standard for the minimum acceptable performance for courses and programs according to grading system;	
<input type="checkbox"/>	14.	Academic satisfactory progress standard for the cumulative acceptable performance for programs according to grading system; and	
<input type="checkbox"/>	15.	Provide a comparison of the IFD baseline competencies (Both 1991 and current) to course competencies.	
<input type="checkbox"/>	16.	Specific requirements for graduation or completion.	
<input type="checkbox"/>	17.	Provide copies of any documentation provided to students (i.e. school catalog, student handbook).	
<input type="checkbox"/>	18.	Description of the degree, certificate, diploma, or credential awarded upon graduation or completion.	
<input type="checkbox"/>	19.	What is the graduation rate? What is the pass rate of these students for licensing exams? What is the employment rate in the field two years post-graduation?	
<input type="checkbox"/>	20.	Is there help finding employment or mentoring in a new business? If so, explain.	
<input type="checkbox"/>	21.	If the school has negotiated any articulation agreements with other institutions for transfer or awarding of credit based on course completion at the school, a description of those articulation agreements will be included in the school catalog. Description will include at a minimum the name of institutions with which an articulation agreement is in place, the names of all eligible courses, and the process to initiate a transfer request.	



## 5. Syllabi

### Provide Syllabi for Courses:

A syllabus is intended to be an overview of the expectations that students must meet, as well as what they can expect from the instructors. In effect, it constitutes a written agreement between students and instructors about how a course will proceed and what the responsibilities of each party are. There are seven components that are required to be in your syllabus. You may add additional information to suit your program's individual needs, but the following items must be included.

#### **Basic Information**

- The name of the course (and when used, the course number) as well as the year (e.g., 1/2007);
- Number of clock hours, credits, or lessons (corresponding to how the program is measured);
- Syllabus revision date information (if you have revised policies after the start of the course, be sure to include the date the policies were revised and the syllabus reissued);
- Meeting times and days for the course;
- Where classes will meet (building name and / or room number or name);
- The instructor's name and location of his / her office, if any;
- Times when instructor is available for questions outside of class time;
- Method of contact to schedule time with the instructor outside of class time or to ask questions;
- If the syllabus or other course material is available on the Internet, include the URL address;
- Statement of prerequisites.

#### **Course Description or Overview**

Course descriptions can vary. Typically they are one paragraph in length and are meant to give students an idea of the goals, and scope and depth of information offered in the course. Repeat here the list of any prerequisites that are required or recommended.

#### **Texts / Materials**

List the texts that will be used for the course, making sure to clearly mark which are required and which are recommended. List text material by ISBN number as well as by title, author(s), and edition. Include all other materials and supplies required for the course. Indicate who is responsible for furnishing what, and provide sourcing information as applicable.

#### **Performance Assessment Information**

Include a summary of the number of competencies to be assessed during this course, a synopsis of the methods of assessment, and one or more statements regarding the use of criterion-referenced grading, e.g., performance is not averaged, one competency does not compensate for another, all competencies must be passed satisfactorily to pass the course, etc.

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### **Grading Plan**

Explain your grading system for the course. Use charts or tables as necessary to show how grades are assigned. Provide a description of what each level in the grading system means. Explain your retesting policy; include time between assessments, required learning activities before attempting a retest, any limitations put on retest scores, etc.

### **Course Expectations**

In this section restate your minimum satisfactory progress standard for the course, your attendance policy and standard, and any policies you have for the course regarding participation, clinical, lab, shop, or worksite procedures, small group procedures, personal conduct, cheating, meeting deadlines, use of technology, etc.

### **General Policies and Information**

Any other policies you may have regarding topics such as equity / inclusiveness, disabilities services, philosophy of core abilities or performance-based instruction, a reference bibliography or other supporting materials of interest, or any other information pertinent to the progress or materials of the course go here.

### **Schedule / Calendar of Assignments**

This schedule is a description of what is happening weekly during the course. Include those activities that have due dates. Make sure to **bold**, underline, or *highlight* significant due dates for learning activities, projects, formative assessments, and competency performance assessments. Also include in your syllabus dates of special events or guest speakers and school holidays. Keep in mind that if you want your students to perform well, it is best to give them a clear and stable sense of due dates so that they can plan their time accordingly.

## ***6. Internship / Externship***

If you offer programs for which a student will need to complete an internship or externship, please answer the following questions:

1. Describe your process for assigning a student to an internship / externship site.
2. Describe the internship / externship content and assessment. Provide the minimum requirements to satisfactorily complete the internship / externship.
3. Describe how you will ensure that each student who needs to complete an internship / externship experience to graduate will have a site to work with?
4. Please attach a copy of the agreement you will use with an organization to establish an internship / externship for your students.
5. Please attach a list of internship / externship sites you have agreements with for future student placements and how many students can be placed at each site at one time.