



Memorandum of Understanding
Colorado Northwestern Community College
HPR 180 Pre-Dental Hygiene Internship



This memorandum of understanding between the Student, Dentist, and Colorado Northwestern Community College provides the student with internship credit hours through their work at a dental office. To qualify for internship credit through CNCC the following conditions must be met:

- The dentist (or their representative) will interview and accept the student as an intern. It is the student's responsibility to find a dental office willing to participate in Pre-Dental Hygiene Internship.
The student and dentist will complete this form for approval by the Internship Director prior to beginning the Internship.
At least 7 of the listed tasks (filled out below) will be integrated into the intern experience and evaluated.
The student is required to observe/assist for 45 hours.
The student will keep a Daily Journal outlining their learning experiences and training to be turned in to the Internship Director at the end of the intern period.
The student will write a report summarizing their training, experiences, and personal growth during the internship to be turned in to the Internship Director at the end of the intern period.
Dentist (or their representative) will complete an Evaluation Form of the student's performance as an intern to be turned in to the Internship Director at the end of the intern period.

It is understood that the student is a volunteer employee of the dental office as well as a student of CNCC. The student must conduct him/herself in a professional and scholarly manner at all times in accordance to the dental office's and college policies. This internship can be terminated at any time by the dental office due to a failure of the student to meet the expectations of the dental office. Failure to meet these expectations may result in failure of the internship and loss of credits. One credit hours will be awarded for 45 hours of internship time.

This form should be returned to the Internship Director prior to the beginning of the internship. The form may be mailed, faxed, or sent by email as an attachment (PDF preferred).

Tasks for evaluation: (Determined by the dentist or student's direct supervisor. Check all that apply)

- Team Concept
Work ethics
Personal professionalism (Conduct and Appearance)
Health and safety
Asepsis
Personal protective equipment use
Haz-com standards
Film processing and darkroom procedures.
Sterilization and care of dental instruments.
Fundamental patient education
Basic health care ethics
Other techniques or tasks determined by the Dental Office. List in detail

Four horizontal lines for listing additional tasks or details.



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Student Information (completed by student)

Name:		S# (when known)	
Mailing Address:			
City:		State:	ZIP
Contact Phone:	Email Address: (CNCC Student email address preferred)		
Age: (Students under age 18 may not be exposed to X-ray Radiation)			

Dental Office information (completed by dental office)

Supervising Dentist:		License Number	
Practice Address:			
City:		State:	ZIP
Contact Phone:	Email Address:		
Direct Supervisor – if different from above	Title (Hygienist etc.)	License Number	
Date of Interview with Student:			

I understand and agree to the conditions listed above.

Student Signature:	Date:
Supervising Dentist Signature:	Date:
Direct Supervisor Signature – if different from above	Date:
Internship Director Signature:	Date:

Return form to Internship Director:

Dr. Jay McLaughlin      Phone : (800) 562-1105 x254 or (970) 675-3254  
 500 Kennedy Drive      Fax: (970) 675-5046  
 Rangely, CO 81648      Email: jay.mclaughlin@cncc.edu