



**DIPLOMA IN APPLIED SCIENCE
DENTAL ASSISTING WEIGHTED
ADMISSION FORM 2024**

Weighted Admission Period

Fall Enrollment - January 15 through May 1

Campus Location:

Barton Campus - Dental Building # 112 (S. Pleasantburg Dr., Greenville, SC)

Online Dental Programs Career Talk (Mandatory)

Career Talk must be current (valid 1 year) to be eligible to apply. Date Completed: *

Date: *

GTC Student ID #: *

Name: *
(Last)

*
(First)

*
(Middle)

*
(Other Name Used)

Address: *

Apt. No. *

City: *

State: *

Zip Code: *

Home Phone: *

Work Phone: *

Cell Phone: *

GTC Email Address: *

Please read and verify each statement:

- I have completed the application process to GTC and have received an acceptance letter from Admissions. I am now eligible to complete the Weighted Admissions Form.
- I will have official transcripts from other colleges sent directly to and evaluated by GTC Transcript Evaluation Office/Student Records. Official transcripts must be submitted once spring courses taken during the application period are completed. GTC does not always recognize courses at another institution as being equivalent to its own. Students can look up Transfer Equivalences on the GTC website or contact the Transcript Evaluation Office.
- If transferring from a foreign county, I will have a course-by-course evaluation from WES. WES evaluation must be received and evaluated by the GTC Transcript Evaluation Office.
- I understand that courses/grades can be viewed in GTC4me.
- I have completed Phase I courses. Only two graded attempts for a course are allowed.
- I will attach a copy of a current certification, licensure and/or diploma in health care or science field, if applicable. Subject to verification.
- I will attach documentation of work experience in healthcare (direct or indirect patient care) on official company letterhead stating dates of employment and job description, if applicable. **Subject to verification.**

**Weighted Admissions form and attachments will be submitted
using the SUBMIT button at the end of this form.
Submission serves as the time/date stamp.**

**Dental Assisting
864-250-8203**

Student Name: *

GTC Student ID #: *

Section A: General Education Courses (quality points = credits x letter grade [A=4, B=3, and C=2])

Count ONLY those courses earned with a grade of "C" or higher.

Courses Taken	Credits	College/University Where Course Was Taken	Semester/Year Course Taken	Letter Grade	Quality Points
BIO 112* may substitute BIO 210/211 or BIO 215/216	4				
ENG 101	3				
**SPC 205, 208 or 209	3				
SOC 101	3				
**HSS 295 or COL 105 No other substitutions	3				
Total Credits				Total Quality Points (maximum of 64 points)	

Technical GPA [Total Quality Points ÷ Total Credits = Technical GPA (do not round)] MUST BE 2.50 OR HIGHER TO QUALIFY FOR ADMISSION (maximum of 7 points)	Technical GPA	3.00-3.49=3 points 3.50-3.99=5 points 4.00=7 points	
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Choose only one if applicable	Completion of all above Courses - All A's (1st attempt only)	If YES insert 15 points =>	
	Completion of all above Courses - A's and B's (1st attempt only)	If YES insert 10 points =>	
	Completion of all above Courses - All B's (1st attempt only)	If YES insert 5 points =>	

GTC Honors Program - General Education Courses Above [2 points per course] (maximum of 10 points)	
Total Section A (maximum of 96 points)	

*The combination of the higher level (BIO 210/211 or BIO 215/216) will substitute for BIO 112. Both courses in the combination must be completed at the time of application. The highest grade of the combination taken will be used for points on the weighted admission application. Only two graded attempts are allowed for the combination selected. Must be current within 5 years of starting the program.

**For students who intend to apply for the Dental Hygiene program, HSS 295 and SPC 205 should be taken.

Section B: Previous Education, Military & Work Experience (not required)

[Documentation must be attached.]

Educational Experience – Must be from Regionally Accredited Institution				
	College/University	Date Earned	Point Value	Points Earned
Certification, licensure and/or diploma in health care or science field from an accredited institution			5	
Military Service - Documentation may include DD214, Military ID or other official military documentation. (Black out (redact) social security number if visible on documentation.)				
Military Service recognition for: Active Duty, Reserve, Honorable Discharge, or Retired Veteran			10	
Work Experience (choose only one) – Documentation must include dates of employment and job description.				
Work Experience in Healthcare – DIRECT Patient Care (6 consecutive month minimum within the last 5 years)			5	
Work Experience in Healthcare – INDIRECT Patient Care (6 consecutive month minimum within the last 5 years)			3	
Total Section B (maximum of 20 points)				

TOTAL POINTS - SECTIONS A and B

Attach Documents:

Work Experience

Previous Education

File Upload

File Upload

Signature _____

Date _____

Student Signature _____

Date: _____

SAMPLE