This exam application packet includes the application for the:

- Washington State Dental Hygiene Drug and Law (WSJ) Exam

This application packet provides information concerning the Washington State Dental Hygiene Drug and Law (WSJ) exam required for Dental Hygienist licensure in the state of Washington.

The WSJ Exam is administered by the Dental Assisting National Board, Inc. (DANB) under an agreement with the Washington State Department of Health (WSDOH). This exam consists of 20 items covering the Washington State Dental Hygiene Practice Act, Dental Regulations for the State of Washington and legend (Prescription) drugs.

Exams are administered in a computerized format at any of the national test centers contracted by DANB. Candidates are given 45 minutes to complete the 20-item exam. Pertinent sections of the act, regulations, and prescription drug references appear on the computer screen adjacent to each test question.

The following links to Washington state websites are included as reference points for candidates who wish to prepare for the Washington State Dental Hygiene Drug and Law exam:
- Administrative Procedures and Requirements for credentialed health care providers in the state of Washington: http://apps.leg.wa.gov/wac/default.aspx?cite=246-12
- Washington State Department of Health: http://www.doh.wa.gov/

Testing Timeline

Once you submit your application, the timeline for processing is:

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-4 weeks</td>
<td>Once your payment is processed, DANB will review your application and documentation. If any additional information is needed, DANB will contact you by email.</td>
</tr>
<tr>
<td>1-2 business days</td>
<td>Upon approval of your application, you will receive an email with a link to schedule and take your exam within 60 days. The information will be posted to your online account at danb.org.</td>
</tr>
<tr>
<td>Exam day</td>
<td>You will receive preliminary results at the testing center after completing your exam.</td>
</tr>
<tr>
<td>2-3 weeks from exam date</td>
<td>You will receive official exam results and any earned certificates by mail.</td>
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Applying for an Exam

Submitting an Exam Application
Exam applications must be mailed or faxed to DANB. The candidate should read this packet to ensure a completed application is submitted with all required documents and fees.

Signing and dating the application is required. By signing and dating the application, the candidate affirms that the application and documentation are accurate and that the candidate agrees to abide by all applicable DANB policies described in this packet, including the Application Statements on page 6. The signature also allows DANB to release exam results to state regulatory agencies.

Payment Instructions
DANB accepts payment by check, money order or credit card (Visa, MasterCard, American Express or Discover). Check or money order payments must be payable to DANB in U.S. dollars, must be written in English, must include the candidate name and must be mailed with the exam application. The application is a contract to test, and the check or credit card authorization is the contract to pay.

Returned Checks
If a check is returned by the bank for any reason (including but not limited to nonsufficient funds, stop payment, closed account or refer to maker), DANB will notify the candidate and assess a $25 nonsufficient funds (NSF) fee to the account. The candidate will not be able to take the exam until a cashier’s check or money order for the full application and exam fee plus the $25 NSF fee has been received. If full payment has not been received within 30 days, the application will be null and void and the candidate’s account will remain on finance hold. The candidate must pay $100 (the $25 NSF fee and $75 nonrefundable processing fee) before DANB will remove the finance hold and process any exam application. No new business will be allowed for the candidate until the finance hold has been removed.

Incomplete Exam Applications
It is the responsibility of the candidate to ensure the application is complete. If an application is incomplete, a letter indicating the reasons for the incomplete application will be sent to the candidate and the payer (if different). A refund for the exam/certificate fee, minus any stated nonrefundable fees, will be sent within 30 days of notice of the incomplete application. Refunds will be made only to the payer. An exam application is considered incomplete for reasons including but not limited to:

- Missing information (e.g., candidate and/or payment information)
- Appropriate documentation is not enclosed
- No date or signature
- Insufficient payment

Duplicate Exam Application
If two applications are received for the same exam, completed applications will be processed, and duplicate payments will be returned, minus the $75 nonrefundable application fee, within 30 days, after the payment clears.

Group Testing
Groups of six or more candidates may request to take any DANB exam on the same day, at the same test center location. Download the Group Testing Form from www.danb.org for more information.

Candidates with Disabilities
DANB exams are designed to provide an equal opportunity for each candidate to demonstrate his/her knowledge-based competency. The exam will be administered to best ensure that it accurately reflects a candidate’s aptitude, achievement levels or other skills intended to be measured, rather than reflecting a candidate’s impaired sensory, manual or speaking skills except where those skills are factors the exam purports to measure.

DANB adheres to the provisions outlined in the Americans with Disabilities Act. In accordance with this act, DANB will make every reasonable effort to offer the exams in a manner that is accessible to people with documented disabilities. If auxiliary aids or alternative arrangements are required, DANB will attempt to make the necessary provisions, unless providing such would fundamentally alter the measurement of skills and knowledge the exam is intended to test, would result in undue burden, or would provide an unfair advantage to the disabled candidate.

The candidate must submit the Reasonable Accommodations Request forms (found on www.danb.org) and the required documentation, specifying exactly what aid or modification is requested by a physician or psychologist, with the exam application. DANB will only accept the forms found on www.danb.org. DANB reserves the right to authorize the use of auxiliary aids or modifications in such a way as to maintain the exam integrity and security. DANB exams are administered only in the English language. Modifications will not be approved for a candidate who requests accommodations because English is a second language.

DANB’s Nondiscrimination Policy
DANB does not discriminate in application, examination or certification activities on the basis of age, sex, gender identity, marital status, race, color, religion, national origin, sexual orientation or disability.
Retaking a Passed Exam

DANB certificants/candidates may take and pass DANB-administered exams only once unless directed to retake the exam by DANB staff in order to reinstate a certification(s) or to meet state regulatory agency requirements. Candidates from the state of New Mexico may take and pass the RHS exam no more than two (2) times in a 12-month period.

Any candidate who applies to take a DANB exam and has previously passed that exam will be in violation of this policy and will have the application denied and will be issued a refund minus the nonrefundable application fee.

Retaking a Fail Exam

If a candidate takes more than one component exam in a single sitting but does not pass all the component exams, the candidate only needs to reapply for and retake the failed component exam(s) with a new application, required documentation and fees. State laws may require additional education after failed attempts. There is no limit on how many times a candidate may retake a failed exam.

Scheduling a DANB Exam

Receiving the Test Admission Notice

Candidates will be sent a Test Admission Notice within three to four weeks of submitting a completed exam application. The Test Admission Notice may also be downloaded through the candidate’s online DANB account. The Test Admission Notice will include instructions to schedule the exam appointment.

Check the Test Admission Notice for any errors and report them to DANB immediately at 1-800-367-3262. For example:
- Exam type is incorrect
- Candidate’s name is spelled incorrectly
- The candidate’s ID reflects a different name (e.g., married, maiden, hyphenated, mother’s maiden name)

The name on the Test Admission Notice must match the candidate’s ID exactly.

The middle name does not need to be spelled out, but the initial must match (e.g., “M” on the ID and “Mary” on the Test Admission Notice is acceptable and vice versa).

The candidate will be turned away from testing if the name on the ID does not match the Test Admission Notice exactly and would need to reapply with a new exam application and pay the full exam fee.

The 60-Day Testing Window

The candidate must take the exam within the 60-day window listed on the Test Admission Notice.

Scheduling an Exam Appointment

The candidate should schedule the exam appointment as soon as they receive or download the Test Admission Notice. The Test Admission Notice includes instructions to schedule the exam appointment at a Pearson VUE location. To find the nearest test center, visit www.vue.com/danb.

Test centers may have limited availability; appointments are scheduled on a first-come, first-served basis. DANB cannot guarantee the availability of specific test center locations, dates or times; changes to test center locations and/or hours may occur without notice.

Exam Appointment Confirmation

After the exam appointment is scheduled, Pearson VUE will send an appointment confirmation by email (if the email address was provided) or by regular mail. Candidates should read all email and mail from Pearson VUE, as it will contain important information regarding the exam appointment. Contact Pearson VUE to request a duplicate appointment confirmation notice.

Rescheduling an Exam Appointment

To reschedule an exam appointment within the 60-day testing window, the candidate must contact Pearson VUE. The candidate may reschedule an exam appointment up to 24 hours before the scheduled exam start time at no additional fee. See the Test Admission Notice for Pearson VUE contact information.

Requesting a New Testing Window

If a candidate cannot schedule or reschedule an exam before the end of the 60-day testing window and would like to request a new testing window, the candidate must complete both steps below:

STEP 1: Cancel the exam appointment: If an exam appointment has been scheduled, the candidate must cancel the appointment with Pearson VUE at least 24 hours before the scheduled exam start time. An exam appointment can be canceled online by visiting Pearson VUE’s website, www.vue.com/danb, or by calling Pearson VUE’s toll-free hot line during normal business hours. Failure to cancel an exam appointment will result in forfeiture of the full application/exam fees, and the application is null and void.

STEP 2: Request a new 60-day testing window: Mail or fax the Request a New Testing Window form to DANB within 60 days (pay $60 nonrefundable fee) after the end of the original testing window. A candidate may request a new testing window only one time. After the first request for a new testing window, a current exam application with any required documentation and full fees must be submitted.
Requesting a New Testing Window Due to a Missed Exam Appointment
If the candidate arrives more than 15 minutes after an exam appointment start time, the candidate will be accommodated at the discretion of the test center administrator. If the administrator is unable to accommodate the candidate, or if the candidate does not take a scheduled exam because the candidate missed the appointment (for any reason except a valid emergency) or the candidate was denied entry, the candidate may reapply for the exam with a reduced fee using the Request a New Testing Window Due to a Missed Exam Appointment form within 60 days of the missed exam appointment (after 60 days, the candidate must reapply for the exam with a new application, any required documentation and the full fee). DANB will mail the form to eligible candidates. If another appointment is missed (for any reason except a valid emergency) or the exam is not taken within the new testing window, a current exam application with full fee must be submitted; a candidate may request a new testing window due to a missed exam appointment one time.

Requesting a New Testing Window Due to an Emergency
If an exam appointment is missed due to a personal emergency, the candidate must submit a Request to Receive a New Testing Window Due to an Emergency form explaining the emergency, and include supporting documentation. The request must be submitted within 60 days of the scheduled exam date. Download the form at www.danb.org. Call 1-800-367-3262 with any questions about what constitutes an emergency and appropriate supporting documentation. Approved requests will receive a new 60-day testing window at no additional fee.

Canceling an Exam
If a candidate has submitted an application for an exam and wishes to cancel (not reschedule), the candidate forfeits full application/exam fees and the application is null and void. No refunds are given for canceled exams due to the fact that DANB’s nonrefundable application fee of $75 and cancellation fee of $40 are nearly equal to the Washington Dental Hygiene Law Exam fee of $135.

When Pearson VUE Cancels an Exam Appointment
In the event of weather or other emergency, Pearson VUE will attempt to notify candidates by phone of an exam appointment cancellation and will reschedule at no additional fee.

Taking a DANB Exam

What to Bring to the Test Center
Candidates are required to bring one form of acceptable ID to the test center. To be accepted, the candidate’s ID must be:
- Currently valid, non-expired
- Government-issued
- Photo-bearing
- Signature-bearing
- In roman characters
- The same exact name as listed on the Test Admission Notice

Test centers may use an electronic fingerprinting, palm vein and/or photographic security system for identification purposes only. Test centers may use a video/audio recording system to enhance exam security. The candidate must not bring any reference materials or notes into any test center area. A locker will be provided at the test center to store any personal items. The candidate will be provided with an erasable noteboard and marker to use during the exam. No visitors or unauthorized individuals will be permitted in any test center area or building during testing sessions.

Test Center Environment
The candidate will receive a tutorial before the exam to help the candidate feel comfortable with the computerized format and how to navigate the exam. The tutorial is not a practice test. The candidate will be given 5 minutes to complete the tutorial, which will not count against the time to take the exam.

There are no breaks during the exam. Candidates may be excused to visit the restroom, one at a time. Candidates are not allowed to leave the building during test time. During the absence, the exam time clock will continue to run. No additional time will be provided.

Candidate Behavior Before, During and After an Exam Appointment
The behavior of each candidate taking the exam will be monitored. Improper behavior is not acceptable before, during or after an exam appointment. DANB seeks to ensure a fair and equitable testing experience for all individuals and to ensure the security and reliability of the process. DANB’s Disciplinary Policy & Procedures form, which is available at www.danb.org, contains examples of improper behavior.
Washington State Dental Hygiene Drug and Law Exam

Exam Security
The exam is confidential. Any individual who removes or attempts to remove testing-related materials from the test center, or who attempts to memorize, distribute or otherwise misuse an exam, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purpose, without the prior express written permission of DANB, will be subject to legal action. Any candidate or certificant who engages in improper behavior also will be subject to disciplinary action by DANB, which may include denial or revocation of certification or recertification. The test center administrator will notify DANB of anyone who talks during the exam, gives or receives assistance, or otherwise engages or appears to engage in dishonest or improper behavior before, during or after the exam. Those candidates may be required to cease taking the exam and leave the test center.

After reviewing a reported incident, DANB will determine whether there is reason to believe that a candidate has engaged in cheating or other improper behavior, or has otherwise violated the security of the exam. DANB may, at its discretion, pursuant to the procedures set forth in DANB’s Disciplinary Policy & Procedures, take disciplinary actions, including but not limited to the following:

- Order the candidate to retake the exam at a time and place to be determined by DANB
- Invalidate or refuse to release the exam results of the candidate
- Deny the candidate’s current application for certification
- Require the candidate to wait a specified period of time before reapplying to take the exam
- Revoke the candidate’s eligibility to sit for future exams
- Take a combination of any of the above actions or other action that DANB may deem appropriate.

If a test center administrator allows a candidate to take an exam that the candidate is not registered for, those exam results will not be valid.

After the Exam

Name Changes
To change the name on record, a candidate must submit a Name Change Request form and required documentation. The form is available at www.danb.org.

Address/Phone Changes
To notify DANB of address or phone number changes, the candidate may log in to their account at www.danb.org to update the information or email danbmail@danb.org or call 1-800-367-3262.

DANB Communications
All communications sent to and from DANB are DANB’s property. DANB cannot guarantee that communications will remain confidential; clients have no expectation of privacy with respect to items sent or received. DANB may disclose communications as necessary to comply with legal processes. DANB responds to phone and email messages within two business days.

Hand Scoring
DANB will hand score an exam on request. The candidate must submit a Request for Hand Scoring of Exam Results form and a $75 hand scoring fee to DANB within 30 days after the official score date printed on the exam results received. Hand scoring results are completed within 30 days of a request. If the pass/fail status is reversed as a result of the hand scoring, the $75 fee will be refunded.

Official Exam Results
WSJ candidates will receive an official exam result upon leaving the test center. The official exam results received at the test center should be retained for the candidate’s records. Each week, DANB will submit official candidate results to the WSDOH on behalf of the candidate. The candidate will not be required to submit WSJ exam results to the WSDOH.

Release of Exam Results
Exam pass/fail results will not be released to employers or any individuals other than the candidate, except on written request of the candidate. DANB releases exam results or certification verifications to some state regulatory agencies.

Verification of Certificates and Certification
DANB will verify DANB certification and DANB exam pass/fail status and the effective date(s) of certification over the phone to anyone on request, since these items are matter of public record and may be disclosed. DANB will not verify passing status of state exams over the phone, but will verify if a candidate has earned a state certificate or license issued by DANB on behalf of a state board of dentistry. A Candidate/ Certificant Request for Credential Verification form is available at www.danb.org. Only a candidate/certificant or employer may request written verification. DANB offers verification on its website. See the Application Statements for more details.

Appealing a Decision
To appeal a DANB decision regarding eligibility, administrative or exam content issues, a candidate may submit a Request for Reconsideration form and a $50 appeal fee to DANB’s Executive Director within 30 calendar days of the date on the DANB correspondence that prompts the candidate to appeal (e.g., date on the letter indicating the candidate’s application was incomplete, date on candidate’s exam results). A copy of the policy and form governing reconsideration is available at www.danb.org or by contacting DANB at 1-800-367-3262.
Please read the following Application Statements carefully. These statements apply to all DANB state exams. Candidate’s signature on the application indicates understanding and agreement to be legally bound by these statements.

1. I hereby apply to the Dental Assisting National Board, Inc. (DANB) for examination and certification by DANB and issuance of my exam results to the Washington State Department of Health (WSDOH), in accordance with and subject to the procedures and regulations of DANB and the WSDOH. Under penalty of perjury, I declare that the information provided on my application is true. I have read and agree to the requirements and conditions set forth in the DANB application packet covering eligibility for and the administration of certification exams, the certification process, and DANB policies, including but not limited to the DANB Code of Professional Conduct. I agree to disqualification from the exam, to denial of certification, and to forfeiture and return of DANB of any certificate granted me by the WSDOH based on DANB exam results, in the event that any of the answers or statements made by me in this application are false, or in the event that I violate any DANB rules or regulations. I authorize DANB to make whatever inquiries and investigations it deems necessary to verify my credentials or professional standing.

2. I hereby release DANB, its directors, officers, examiners and agents from any and all liability arising out of or in connection with any action or omission by any of them in connection with this application, the certification process, any exam given by DANB, any scoring relating thereto, the failure to issue me a certificate, or any demand for forfeiture or return of such certificate, and I agree to indemnify DANB and said persons and hold them harmless from any lawsuit, complaint, claim, loss, damage, cost or expense, including attorneys’ fees, arising out of or in connection with said certification activities. I UNDERSTAND THAT THE DECISION AS TO WHETHER I QUALIFY FOR A NATIONAL CERTIFICATION OR CERTIFICATE OF KNOWLEDGE-BASED COMPETENCE RESTS SOLELY AND EXCLUSIVELY WITH DANB AND THAT THE DECISION OF DANB IS FINAL. Notwithstanding the above, should I file suit against DANB, I agree that any such action shall be governed by and construed under the laws of the State of Illinois without regard to conflicts of law. I further agree that any such action shall be brought in the Circuit Court of Cook County in the State of Illinois, or the United States District Court for the Northern District of Illinois; I consent to the jurisdiction of such state and federal courts; and I agree that the venue of such courts is proper. I further agree that should I not prevail in any such action, DANB shall be entitled to all costs, including reasonable attorneys’ fees, incurred in connection with the litigation.

3. I understand that except as provided below, this application and any information or material received or generated by DANB in connection with this application or the exam process will be kept confidential and will not be released unless I have authorized such release or the release is required by law. I understand that DANB will verify receipt of any DANB exam application and the date received, on request. I further understand and agree that DANB may also provide verification to anyone by phone, by mail or on DANB’s website regarding whether I hold any DANB certifications, any DANB certificates of knowledge-based competence, and any state-specific certificates administered by DANB on behalf of a state regulatory body. Phone and mail verification will be provided to anyone upon request and will consist of oral or written confirmation of whether I hold any of the DANB-administered credentials listed above and the effective dates for each credential. Online verification through DANB’s website may consist of online display of my name, the DANB-administered credentials I hold and dates earned, current DANB certification status, and my city and state of residence. My full address will not be posted online by DANB. I further understand and agree that DANB may, from time to time, provide my name, address, and phone number to third parties (including but not limited to official DANB affiliates, potential employers; dental conference sponsors; federal, national or state organizations; or legislative committees or task forces proposing or informing stakeholders of legislation). I further understand that this consent will remain in effect unless and until I submit a written request to have this information omitted from release. I understand that if I do not want DANB to display my city and state of residence as part of the online verification process, then I must submit a written request for omission of this information to the following address: DANB Communications Department, 444 N. Michigan Ave., Suite 900, Chicago, IL 60611. I understand that my name, credentials held issued by DANB as described above) and current DANB certification status will be displayed for everyone; opting out of display of information is only possible for an individual’s city and state.

4. I understand that by providing my email address on the application form, I am consenting to receive email messages from DANB and its official affiliates related to their products and services or news affecting the dental assisting profession. I understand that DANB agrees not to provide my email address to any other third party without my consent, and that I can request removal from DANB’s email distribution list by following the directions contained in the Privacy Policy section of DANB’s Terms and Conditions of Use of DANB.org, located at www.danb.org.

5. I authorize DANB to release my exam results to state regulatory agencies. Individuals cannot opt out of DANB release of exam results to state regulatory agencies. I also authorize DANB to use information from my application and exam(s) for statistical analysis, providing that any personal identification is deleted.

6. I understand that I can be disqualified from taking or continuing to sit for an exam, from receiving exam results and from obtaining certification if DANB determines through proctor observation, statistical analysis or any other means that I was engaged in collaborative, disruptive or other unacceptable behavior during the administration of or following the exam.

7. I understand that the content of all DANB exams is proprietary and strictly confidential information. I hereby agree that I will not disclose, either directly or indirectly, any question or any part of any question from the exam to any person or entity. I understand that the unauthorized receipt, retention, possession, copying or disclosure of any DANB exam materials, including but not limited to the content of any exam question, before, during or after the exam may subject me to legal action. Such legal action may result in monetary damages and/or disciplinary action including rescinding exam results and denying or revoking certification.

8. I understand that for each application submitted, DANB will process the appropriate payment. If I fail to show up for an exam for which I have applied, and there is no documented DANB-accepted emergency, and I failed to comply with DANB cancellation policies, I am still obligated to pay the full exam fee. I further understand that taking the exam and then revoking payment constitutes the wrongful use of DANB products and services and I may be subjected to legal action. I am obligated to pay for the exam whether I pass or fail. I agree not to dispute the exam fee. Exam results will be rescinded if the exam fee is not paid in full.
Washington State Dental Hygiene Drug and Law Exam

2020 WSJ Exam Application
This application will be accepted through Dec. 31, 2020.

1. Candidate must sign, date and submit all required documentation and fees to DANB. Incomplete applications will be denied and a refund, minus the $75 nonrefundable processing fee, will be issued.

2. Mail or fax completed application and supporting documentation to DANB. Full payment is required at the time of application.

Section A: Signature and Date (Please sign and date with a pen.)
I hereby affirm that my answers to all questions are true and correct, I have met all eligibility requirements, and I will comply with all DANB policies and procedures. I further affirm that I have read and understood the Application Statements contained in this packet, and I intend to be legally bound by them. I understand that the application fee is not refundable under any circumstances. I hereby apply in accordance with the rules and regulations governing the exam; and I herewith enclose the fee. I hereby agree that prior or subsequent to examination, the WSDOH or DANB may investigate my eligibility and may refuse to issue the exam results and such refusal may not and shall not be questioned by me in any court of law or equity or other tribunal, nor shall I have any claim in the event of such refusal to a return of the fee accompanying the application.

Signature ______________________ Date _____________

Section B: Candidate Information (Please type or print with a pen.)

Last Four SSN _______ _______ _______ _______ Date of Birth _______ _______ _______ _______

Name (must match current ID exactly):

Last ___________ First ___________ Middle Name/Initial _________

Prior Name (if applicable) ___________ Email (required) ___________

Home Address ______________________ City _______ State _______ Zip _______ _______

Phone Numbers:
Office ______________________ Home _______ Cell _______

Section C: Work Experience Information

I work in a: ☐ general dental office ☐ specialty dental practice ☐ other (please specify) __________________________

Section D: Payment (Please type or print with a pen.)

☐ Check/Money Order payable to DANB (must include candidate’s name and be in U.S. dollars) Amount $150.00

☐ Credit Card Authorization (VISA, MasterCard, Discover & American Express accepted):

Credit Card Number _______ _______ _______ _______ CVV _______ Expiration _______ / _______

Cardholder’s Name _______

Cardholder’s Billing Address ______________________ City _______

State _______ Zip _______ _______ Daytime Phone Number _______

Cardholder’s Signature ______________________

By signing, the cardholder acknowledges intent to register for the aforementioned DANB exam in the amount of the total shown hereon and agrees to perform the obligations set forth in the cardholder’s agreement with the issuer. Furthermore, the cardholder understands that the signature obtained at the exam administration shall be used to indicate receipt of purchase. A candidate who fails to show up for the exam for which they registered and has not canceled the exam as described in this packet is still required to pay for the exam. (See the Application Statements for further requirements.)

DANB • 444 N. Michigan Ave., Suite 900 • Chicago, IL 60611
Fax: 312-642-8507
Questions? 800-367-3262 or danbmail@danb.org Do not submit twice or you will be charged twice.
Application Checklist

Have you:

☐ Read the instructions and information in this application packet?
☐ Read and agreed to be bound by Washington and DANB rules, regulations, policies and procedures as noted in this application packet?
   (See Application Statements, p. 7)
☐ Filled out the exam application in its entirety?
☐ Signed and dated the exam application?
☐ Enclosed the application and exam fee or provided credit card information?
☐ Enclosed the Reasonable Accommodations Request forms, if needed?
   Note: These forms can be found at www.danb.org.
☐ Made a copy of your entire application packet for your records?
☐ Addressed your envelope OR prepared your information to be faxed?

Mail to:
Dental Assisting National Board, Inc. (DANB)
444 N. Michigan Ave., Suite 900
Chicago, IL 60611

Fax credit card payments only to:
DANB
1-312-642-8507

If you have not:
• completed the application in full,
• enclosed, signed and dated your application, and
• provided payment (check, money order, cashier’s check) or payment information (credit card)

your application will be considered incomplete and will not be processed.

Incomplete applications will be denied and a refund, minus the $75 nonrefundable application fee, will be issued.