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ABSTRACT

This report describes institutional, faculty, and student activities and problems resulting from Lane Community College's acceptance of a federal contract to develop a paradental training program designed specifically to provide training/retraining required to qualify military-trained dental corpsmen for examination by the Oregon State Board of Dental Examiners and the National Board of Dental Hygiene. Subsequent to acceptance of the contract, a modularized self-paced and self-instructional curriculum was developed, and students were recruited according to specified criteria. Although an abundance of potential trainees was anticipated, a total of only 15 students were selected from 46 applicants. One student withdrew early from the program and 11 of the 12 who completed the Associate of Science degree program passed all sections of national and state dental hygiene board examinations on their first attempt. Curriculum requirements for the paradental contract program students were the same as those of regularly enrolled students but were compressed into 15 months rather than the traditional 18 months. Analysis of the contractor's performance reveals several problem areas, particularly in the total number of students trained. However, numerous benefits, aside from the success of the students, are noted. Recommendations for future application of this type of program are made. Contract materials are appended.
(JDS)

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PARADENTAL TRAINING CONTRACT

Lane Community College
Eugene, Oregon

Special Training Contract
NIH #72-4341

Department of Health, Education and Welfare
Public Health Service
National Institutes of Health
Bureau of Health Manpower Education

January 1, 1975

TC 760 497

--TO THE READER--

The contract number indicated on the cover, title page,
and various instances in the text of this report is
incorrect. The correct number is NIH #73-4024. Our
apologies for the error.

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CHAPTER I

INTRODUCTION

Purpose of the Contract

The purpose of the training contract accepted by Lane Community College was to develop and implement a modularized dental hygiene curriculum designed specifically to provide the training and/or retraining required to qualify the military-trained dental corpsmen for examination by the Oregon State Board of Dental Examiners and the National Board of Dental Hygiene.

Support for the Contract

The Division of Dental Health, Bureau of Health Manpower Education, United States Public Health Service, Department of Health, Education and Welfare awarded a contract to Lane Community College for implementation of the pilot project which the contractor titled "Paradental Training Contract," (Contract No. NIH 72-4341).

Objectives of the Contract

Pursuant to this contract, Lane Community College agreed to:

1. Identify levels of academic and clinical proficiency which would qualify students for licensure by the Oregon State Board of Dental Examiners.
2. Provide quality didactic and clinical training to qualify each student for examination by the National Board of Dental Hygiene

Examiners and the Oregon State Board of Dental Examiners.

3. Within dental hygiene subject matter areas, develop behavioral objectives which specify student performance criteria.
4. Establish competency-based entry and exit criteria for each dental hygiene curriculum offering; these curriculum offerings to be open to challenge examinations.
5. Emphasize the use and development of self-instructional, self-paced education.
6. Provide for the award of full and transferrable credits for all modular units successfully completed by students as a part of this curriculum leading to the Associate of Science degree.
7. Provide continuous feedback to students on their rate of progress through the curriculum.
8. Provide didactic and clinical experience in four-handed dentistry with utilization of dental assistants.
9. Recruit, select and enroll twenty qualified ex-military dental corpsmen in a two-phase project and provide each student with the following support:

- Limited tuition
- Book, uniform, and instrument stipends
- Counseling services
- Remedial assistance (if needed)
- Job placement assistance

The Paradental Training Contract was a project conceived in 1972 by Dr. John Dickson, then the director of the Paradental/Paramedical Department at Lane Community College. Originally he intended on utilizing a special projects grant to establish a pilot program which would allow

military dental corpsmen to gain additional knowledge and skills needed to practice dental hygiene in the civilian sector. The concept was based on his perception of need which grew out of the following events:

1. State allied health leaders convening in the governor's office in early 1972 concluded that a potential pool of untapped and partially trained allied health workers within the armed services existed.
2. The Viet Nam conflict was being resolved and it was assumed that large numbers of veterans were going to be discharged and would be seeking avenues to utilize their military-dental training.
3. Several letters of inquiry to the college from prospective students with military dental hygiene experience indicated that such an idea would be a valid project.
4. Conversations with Dr. Robert Faine, Dr. Dale Podshadley and others associated with the Bureau of Health Manpower Education (H.E.W.) added support to the feasibility of such a training project.

In May, 1972, Lane Community College was invited by the federal government to submit a proposal for implementing the project. Two new ideas emerged in the invitation:

1. The original concept of a grant was changed to meet "contract" specifications; and
2. The proposed dental hygiene curriculum would become modularized and self-instructional.

The contract proposal was submitted to the Division of Dental Health in June, 1972. Negotiations occurred during the summer of 1972 and the contract was awarded on August 17, 1972. Due to contract personnel

changes and considerable reduction of the contract budget, the college delayed accepting the contract until September 13, 1972.

Anticipated Outcomes

The anticipated program outcomes of the contract included:

1. Development of a non-traditional method of dental hygiene instruction such that ex-military-dental corpsmen could proceed at their own learning rate and thereby become eligible for national and state dental hygiene board examinations.
2. Military dental corpsmen could use their previous background and experience as a foundation for a civilian career in dental hygiene.

The anticipated curricular outcomes of the contract included:

1. Instructional materials would be gathered or developed which could be integrated into the total educational experience of the student.
2. Instructional materials gathered or developed would have characteristics such that each would:
 - (a) Utilize a learning format other than the traditional lecture;
 - (b) Allow flexibility of course scheduling and the teaching-learning format;
 - (c) Maintain the student in close personal contact with instructors and with one another;
 - (d) Involve the student in frequent practice and feedback exercises;
 - (e) Serve as a related block of skills and/or information

which would contribute to the student's total body of practical knowledge.

The anticipated student outcomes of the contract included:

1. Each student would possess, when discharged from military service, some dental skills and background which would allow them to eliminate introductory learning experiences by demonstration of their competencies;
2. Training time would be reduced because students could proceed quickly to advanced learning experiences by demonstrating proficiency/competency relative to these basic learning experiences;
3. Utilization of small classes and personalized self-instruction would enable students to progress more rapidly than in a conventional dental hygiene program.

CHAPTER II

CURRICULUM DESIGN AND RECRUITMENT EFFORTS

Curriculum Design

Originally the Paradental Training Contract faculty felt that selected courses in the existing dental hygiene curriculum could be waived on the basis of previous training. A request to the American Dental Hygiene Association for support in this matter was denied on the premise that any credit for course content should be verified on the respective transcript.

The American Dental Hygiene Association-approved dental hygiene curriculum at Lane Community College was restructured in an attempt to determine if the curriculum requirements could be completed in twelve calendar months. Original curriculum design was based on the premise that entering students would possess a wide assortment of dental hygiene experiences and skills. This premise was later proven invalid by the students' performance.

Study loads of students seemed heavy, but having the same instructors for a variety of courses helped to eliminate course redundancy. Traditional, time-consuming projects within selected courses (e.g., Dental Health Education) were eliminated, thereby helping to reduce the student study load. Site visits by the contract staff to three military dental installations revealed that preventive dentistry concepts were taught extensively and thereby could be partially eliminated from the

curriculum. In addition, counseling, study skill assistance, and low student-instructor ratios would allow for accelerated learning rates.

Data Collection

This contract emphasized the use of available modularized self-instructional, and self-pacing materials. Faculty worked for several months writing letters to commercial sources, making personal/professional contacts, attending meetings and conferring with educators from a variety of colleges, while simultaneously attempting to discover and collect already developed self-instructional materials. Educational facilities visited included the University of Southern California, Golden West Community College, San Diego Naval Training Station, San Francisco Dental Health Center, the University of the Pacific, Foothill Community College, and Travis Air Force Base. Oregon colleges consulted included: University of Oregon Dental School, Portland Community College, Mt. Hood Community College, Clackamas Community College, Southwest Oregon Community College and Oregon Technical Institute. Most Oregon schools were visited more than once. In addition visits were scheduled to Sheppard Air Force Base, which is the principle training station for preventive technicians. Ft. Sam Houston and Wichita Falls College were also visited. Extensive contact was made with individuals at Hastings Vocational Technical Institute, the University of Iowa School of Dentistry, Ft. Lewis (Washington) Dental Facility and its affiliate college, Ft. Stillicom Community College. Extensive dialogue with professional organizations, especially the American Dental Association and the American Dental Hygiene Association, was established and maintained.

As a result of formal and informal contacts, it was discovered that little had been done toward the development of modularized self-instructional materials which would be usable in the contract. Some self-instructional materials were gathered from commercial sources, schools of dentistry, and other dental hygiene programs as well as from federal government and military sources.

Evaluation of Gathered Modular Material

As the self-instructional materials were gathered from various sources, the following criteria were utilized in decisions regarding retention or purchase of the materials:

1. Appropriateness (i.e., reading level, "need to know" information, audio-visual hardware required, etc.).
2. Quality (i.e., legibility, clarity of graphics, reproduceability, etc.).
3. Completeness (i.e., performance objectives, criterion tests, practice cycles, etc.).
4. Cost of self-instructional materials compared with potential usefulness.

Of the self-instructional materials gathered, very few met all of the specifications desired by faculty. It became apparent that the task of designing, developing, and implementing the proposed self-instructional dental hygiene curriculum would be an almost impossible task with existing faculty and teaching assignments.

After faculty members reviewed the limited self-instructional materials available, a decision was made to attempt modularization of

only the dental hygiene courses. Attempts were immediately made to schedule the training contract students into regularly scheduled Lane Community College classes and to employ some part-time instructors for instruction and modularization of selected dental hygiene subjects. These part-time instructors were not skilled in developing modularized material.

Recruitment Efforts

One of the primary objectives of the Paradental Training Contract was to encourage the military-trained dental corpsmen to continue in the health care field by entering an associate degree dental hygiene program. It was anticipated that recruitment of veterans, for both phases of the contract, would not pose a major problem. This assumption later proved to be invalid.

Extensive advertisement of the program was accomplished through local and regional newspaper, radio and television announcements. News releases of the contract were distributed to all veterans' affairs offices in two and four year colleges throughout the state. Advertisements also appeared in the Journal of American Dental Association, Journal of American Dental Hygiene Association and the Journal of the American Assistants Association.

Press releases concerning the contract were published in the following documents:

Operation MEDIHIC Newsletter
Project Transition Newsletter
Health, Education and Welfare Region X Newsletter
Army Medical Bulletin
Air Force, Army and Navy Times

Approximately 850 letters were sent to various Air Force, Army, Navy,

Naval Reserve and Coast Guard bases having dental facilities; notices concerning the contract were also disseminated to state directors of Operation MEDIC and coordinators of dental hygiene programs.

Despite extensive recruitment efforts, only 46 veterans inquired about the program prior to enrollment of the first class. Five students were eventually selected from seventeen applicants. During the second phase of the contract, ten students were selected from 29 applicants.

CHAPTER III

SELECTION, ADMISSION, AND GRADUATION OF STUDENTS (TRAINEES)

Very early in the contract the staff decided that it would be impractical to interview each student applicant. An extensive application form, which we hoped would enable us to make rational selections from the hundred or more applications we anticipated, was constructed. One of the major concerns was that we adhere firmly to the federal anti-discrimination statutes. Examination of the form provided in Appendix B indicates that only the first page of the form carried information of the applicant's name, age, sex, or marital status. When completed applications were received, the first page was removed. The remaining pages were then coded for later identification and the application checked for completeness.

Standard office procedures required an automatic follow-up on potential applicants. The procedure was initiated thirty days after their initial inquiry or when their application file was only partially complete. (A copy of this letter is located in Appendix G.) None of the applicants' files were viewed by the staff until the selection committee met.

The criteria for admission to the program were quite simple. First, potential trainees had to be ex-military personnel. They could no longer be on active duty nor on temporary duty. Potential students had to be completely separated from the military service prior to the beginning of classes. Second, priority for admission was granted to those applicants

who had attended one or more of the formal military schools, which trained preventive dental technicians (hygienists). Third, priority for admission was given to those applicants who had three or more years of actual chair-side dental hygiene experience. This experience was verified for each student through correspondence with their references or communication with their former commanding officers. Finally, priority for admission was given to those applicants who had some transferable college credits in liberal arts or medical arts courses. These transferable credits would reduce the number of non-dental hygiene courses which they would be required to take at Lane Community College. The number of applicants meeting even three of these four criteria was so small that they did not need any further refinement.

On the announced selection date the entire staff met as a committee to review the applications and select the class. Each applicant's file was individually rated by a staff member. Ratings were discussed and compared to resolve any discrepancies. Only after the final selections were made was the coded information made available to all committee members.

Only five of the seventeen applicants reviewed were accepted for the first class. The same admission procedures were followed for the selection of the second class, resulting in fourteen students being selected from twenty-nine applicants. Letters of acceptance were sent to successful applicants (see Appendix H). Four of the fourteen students accepted into the second class refused admission.

As the students arrived on the Lane Community College campus, each was given individualized attention from the staff in locating housing

in the area, registering with the Veterans' Administration, and Lane Community College admissions procedures. After all students had arrived, an orientation session was held. Diagnostic tests were also included to determine reading and mathematical ability levels. Students who had completed previous college credits reviewed their transcripts with a staff member. This transcript review served as a basis for the waiver of many courses required by the dental hygiene curriculum. Prior to the first day of classes, dental instruments were issued, lockers assigned, textbooks purchased, and clinic uniforms were selected.

Fifteen months later the ex-military dental corpsmen emerged from Lane Community College as graduate dental hygienists. Their training had been continuous through the summer months.

CHAPTER IV

ANALYSIS OF STUDENT PERFORMANCE

One of the initial concerns of the contract faculty was what would motivate a student to want to come to Lane Community College to enroll in the Paradental Training Contract. Measuring motivational levels of applicants is at best a subjective exercise, but our biases, though not tested, suggest that the Paradental Training Contract student was at least as motivated as a student applying to a regular dental hygiene program. The desire to become licensed to work within the civilian sector was the reason most often given for enrolling in this program. Other reasons included a need to satisfy educational and personal goals.

Early in the contract one student decided to withdraw from the program. He indicated that "I can make a living doing something else probably in an easier way." Contract faculty sensed that this student had reached a point where his personal goals had to be reconciled with the demanding requirements of the training contract.

Students were very helpful when asked to give their initial reactions to the operation of the contract. The following students' comments highlighted this discussion:

My attitude about school is 100% positive. I think this was an excellent opportunity for people like myself . . . to get an opportunity to attend Lane Community College . . . It's like a dream come true for me. I certainly would like to see other people, in the military, get this opportunity.

Needless to say, this program is a long time coming. After I was discharged, I had a good job, but no long range plans seemed to be there . . . I became disenchanted with them (dental hygiene

schools) because of their admission requirements. . . . This program really reinstituted my belief in people and their willingness to help others.

. . . Moving three thousand miles to go to a community college is a big decision. I wanted to become registered ever since the second year in the service. . . . The key, I guess, was that I would be treated like any other student and of course, become certified after our course work was completed.

Twelve of the original fourteen enrollees from the two classes of veterans completed associate degree dental hygiene curriculum requirements in preparation for the licensing examinations within a period of fifteen months. At the close of the project, eleven of the initial twelve had completed Associate of Science degree requirements. All eleven students passed all sections of national and state dental hygiene board examinations on their first attempt.

Identification of student strengths and weaknesses and planning the students' instructional program was no small problem. Contract students' curriculum requirements were identical to regularly enrolled students, but were compressed into a shorter time period. The Paradental Training Contract curriculum required fifteen months to complete the program of study, compared with eighteen months required for the regularly enrolled Associate Degree dental hygiene students. Students in the contract were enrolled for an average of 26 credits per term and an average of 42 class hours per week. Regular students averaged 18 credits per semester and 32 class hours per week.

Academic loads during the contract undoubtedly affected student performance, but the modularized approach allowed students to complete requirements at times without the restrictions imposed by a normal academic calendar. However, the academic loads were borne and the requirements

met by students who had completed, prior to program admission, an average of only seventeen college credits. Seven students finished with less than ten credits prior to admission the program requirements.

Grade point averages also provided additional academic performance information. Training contract students, at the conclusion of their training, had Lane Community College cumulative grade point averages which ranged from 2.82 to 3.84, with the mean Lane Community College cumulative grade point average being 3.25.

Faculty members felt that students proceeded at academically uneven rates throughout the contract. Students managed to successfully complete required courses offered by other college departments (i.e., chemistry, psychology, nutrition, etc.) with grades of "C" or better. This was pleasantly surprising because of their limited college background.

Interviews conducted with contract students indicated that chemistry was the most formidable hurdle of the curriculum. One student related that chemistry might not have been such a problem had his mathematical background been better. Pre-testing by the Mathematics Department revealed such deficiencies, and students were counseled accordingly.

The didactic portion of dental hygiene courses seemed to cause little difficulty among contract students. Student opinions revealed that "nice to know" information should be de-emphasized and greater emphasis placed on "need to know" content.

Since many students had not attended college, contract faculty felt that student academic progress might be hampered because of low reading levels. In order to assess student reading levels, the California

Reading Test--advanced level (9-14) was administered to each student upon admission. The initial reading examination revealed total reading grade levels ranging from 10.2 to 14.4. Only one student showed a decrease in total reading level, while others had grade level gains ranging from 0.60 to 0.80.

Student Attitudes

One of the most difficult problems encountered through the contract was student attitudes. Many of the students viewed their clinical work as a mechanical exercise to be practiced on a set of teeth, rather than as a health service for the patient. The students seemed to have more interest in quantity than in quality of service. This interest may relate in part to their clinical time spent in military service. They may have been working with a transient military population with little opportunity to observe changes in behavior due to patient education.

Diverse Clinical Experience

It has been interesting to note the various differences in clinical skills of these students. In each group (class) were students who were unfamiliar with hand instrumentation, but were familiar with ultrasonic prophylaxis devices. In addition, some students were quite advanced in their clinical skills. These students were more aggressive and had been in the military service for a longer period of time. Also, each had a supervising dentist who exhibited an interest in their development as dental hygienists.

Developing Desirable Instrumentation Techniques

Most of the techniques used by the students seem to have been acquired on a "self-taught" basis. This may be attributed to a relatively short-term training period that did not allow sufficient time to absorb clinical techniques presented. Much of the initial clinical time was spent in re-teaching, attempting to change incorrect instrumentation habits previously acquired.

Some of the positive factors brought to the clinical setting by these students included familiarity with dental operations, motivation, and a higher level of maturity.

All of the students were familiar (in varying degrees) with dental instruments and equipment. Students knew how to care for the equipment and were familiar with principles such as disinfection and sterilization. There was no apparent apprehension on the part of the students when working with patients.

Contract students were highly motivated and very "goal" oriented. They were appreciative of the opportunity to participate in this program even though they felt that the study load required was too great. They were anxious to complete their training in less time than the students in the regular program.

As a group, these students seemed more mature than students in regular dental hygiene classes. As a result, they were dependable and could be counted on to carry out projects with minimal supervision. It was most interesting to listen to comments made by some of the students in September 1974, following some time spent in summer reserve duty.

In each case the students related how pleased they were for their own advancement.

Even though the contract lacked an evaluation phase, students were asked to candidly respond to future educational and occupational plans. Of the four students graduated from the first class, all are working as hygienists on a full or part time basis. Seventy-five per cent of the students are currently working in Oregon cities, while the remaining student is working in California. Seventy-five per cent of the students indicated that obtaining a bachelor's degree in a health-related area was their major educational goal, while the other student expressed no future educational plans.

Students who were graduated from the second phase of the contract are currently assuming a variety of roles. While some are awaiting dental hygiene board examination results, others are employed or are seeking work in Oregon and elsewhere. Fifty per cent of the students indicated that their future plans include obtaining a bachelor's degree in a health-related field. Three want to remain clinical hygienists and two failed to indicate their future plans.

CHAPTER V

ANALYSIS OF CONTRACTOR PERFORMANCE

An assumption made early in contract negotiations was that a large reservoir of potential student applicants existed. Even with extensive recruitment efforts described on pages 9 and 10 of this report, this large applicant pool failed to materialize. The number of acceptable students fell far below the number which Lane Community College had agreed to educate.

Prior to the arrival of students, the Paradental Training Contract directors and faculty formulated their best estimate of students' clinical and academic dental hygiene background based on visits to military training institutions. Unfortunately, our estimate of the students' previous educational and clinical experience was considerably higher than that actually possessed. The magnitude of this miscalculation was such that it pervaded all segments of contract operation.

The first class of Paradental Training Contract students was admitted in March, 1973. Within six weeks the contract faculty became fully aware that the projected educational plans for the students would not be realized and would have to be changed. In an attempt to resolve this dilemma:

1. Students who needed help with time management problems were identified and referred to the Study Skills Department for assistance.
2. The dental hygiene curriculum was resequenced, rescheduled and lengthened to a fifteen month training period.

3. Format emphasis of curriculum development switched from written to audio-visual materials.
4. Attempts were made by faculty to direct even more individual attention to student problems.

Personnel turnovers also seriously affected the outcome of the contract. These changes occurred at both federal and local levels. Little could be done to alleviate problems caused by personnel changes at the federal level. However, attempts were made to resolve the issue at Lane Community College by one contract faculty member shouldering the responsibility for the contract while the vacancy of project director was advertised and filled.

The budgetary document for the contract seemed somewhat inflexible and inadequate for the purpose of the contract. The transfer of monies between line items within the budget could have been made easier had project officers been given greater fiscal authority. In addition, the contract budget was not adequate, which may have been due to lack of foresight in the negotiating process or to personnel changes at a critical time in the negotiations of the contract. However, in an attempt to resolve these and other financial problems, Lane Community College agreed to assist with the financing of the contract.

Acceptance of the Paradental Training Contract was received with mixed feelings by the faculty of the Paradental/Paramedical Department. This was most likely due to a local problem in communication during the negotiations of the contract. These feelings were partially resolved, but the idea still existed that the Paradental Training Contract was a "separate entity" and was not to be identified with the "regular department."

Physical location of the contract office in a separate building across the campus did little to ease the communication problem.

One very difficult personnel problem occurred while trying to initiate the contract. Clinicians were needed to implement the clinical portion of the program, but individuals skilled in educational methodologies who could develop didactic dental hygiene or basic science course modules were also needed. At no time was this more apparent than when a key member of the teaching faculty resigned and had to be replaced. Filling a position which demanded so many skills seemed all but impossible. This resignation created a burden on existing faculty and for awhile discussion centered on termination of the contract. Part time faculty were hired to fill the void, but the personnel transition was difficult.

Throughout the contract, faculty members were overloaded with responsibilities. Teaching and developing of modules occupied the majority of instructors' time and left little or no time for modular revisions. In addition, faculty members counseled with students and attempted to alleviate their personal as well as academic problems. As important as these activities were to the project's success, the strain on the faculty's professional and personal life bordered on the excessive.

Educational funds for veterans which were due but not forthcoming to the students caused contract faculty great concern. Those students who had attended post-secondary (non-military) schools became caught in a process which, in some instances, delayed the receipt of student salaries as much as two months. Attempts were made through the Veterans' Administration office on campus to speed the necessary transfer of records forms to veterans so that the receipt of payments would not be delayed.

In some cases, students sought aid from the American Red Cross or their congressmen.

Location of adequate housing within student budget limitations posed no small problem. In anticipation of such a problem, a packet of information regarding the Eugene-Springfield community was forwarded to every student prior to his arrival at Lane Community College. Items included in the packet were:

- City maps
- Local newspaper
- Driver's license information
- Eugene Chamber of Commerce pamphlets
- Information on elementary and secondary schools
- City bus schedules and routes
- Local listing of physicians and dentists

Financing of student personal emergencies seemed to be a problem. Short term loans were available, but only small amounts were available to students through financial aid sources at Lane Community College. The local dental society, dental auxiliaries, and the American Red Cross assisted students with small loans and other necessary items. Some students received food stamps while attending Lane Community College.

Contract objectives three, four and five (see page 2) are concerned with the development of curriculum materials which are designed to allow the educational process to proceed with a maximum of efficiency and a minimum of gamesmanship. The contract staff developed discrete segments of curriculum materials which were called units or modules.

Each unit or module consisted of behavioral objectives containing clearly stated standards of terminal student performance, two or more versions of a competency-based examination, and the instructional materials. The instructional materials varied greatly in the methodology utilized.

Most modules utilized either slide-tape, videotape, audiotape, linear programmed texts, or workbook formats as the primary vehicle of communication. Some modules merely listed reading assignments in standard (widely adopted) textbooks. Due to the excessive staff workload and rigid time-line of the contract, the classroom lecture is still used as the primary instructional mode in some modules. We attempted to incorporate into each module feedback and practice cycles at appropriate points.

As a result of the contractor's efforts, some completed modules now exist in each of the following general subject matter areas:

- Dental Hygiene--Preclinical
- Dental Hygiene--Clinical
- Dental Morphology
- Oral Roentgenology
- Head and Neck Anatomy and Physiology
- Oral Pathology
- Periodontology
- Disease Control
- Dental Health Education
- Human Anatomy and Physiology
- Microbiology

In addition to the direct and obvious benefits of modular development to the contract's students, there have been and will be many indirect, less obvious benefits derived from the contract. For example:

1. Modular programs developed under the auspices of the Paradental Training Contract are currently being used within other Paradental/Paramedical programs. Instructors within the dental assisting program have used modules whose content deals with rubber dam placement, dental morphology and oral roentgenology. Medical office assistant faculty have used the information contained within the Introduction to Pathology module.
2. Instructional departments which offer courses that are an integral

part of Paradental/Paramedical programs are also using some instructional modules as developed by the Paradental Training Contract faculty. The Science Department is currently using the entire Anatomy/Physiology course which is modularized. Selected basic science modules are being used in General Biology, Microbiology, Human Genetics and Cell Physiology. The Home Economics Department has used an instructional module about oral manifestations of vitamin deficiencies.

3. Allied health educators at post-secondary institutions within Oregon, Washington and Montana have borrowed developed modular units for trial. In addition, a variety of faculty from these schools have extensively discussed the modular development process with Paradental Training Contract faculty.
4. The Oregon State Board of Dental Examiners exhibited considerable initiative and flexibility with regard to the Paradental Training Contract. They were receptive to an unprecedented licensure examination upon request, administered the examination outside the University of Oregon Dental School and participated in a mutual exchange of ideas and consensus about the total operation of the contract. Subjective comments of the examiners indicated they were well pleased with the quality of work performed by the students.
5. Paradental/Paramedical Department instructors (not directly related to the contract) exhibited changes in their behavior toward students. Courses became more organized and faculty seemed to be as interested in terminal student performance as in method of presentation.

Students, meanwhile, are becoming very task-oriented, appreciating and oftentimes demanding such course organization.

6. As a result of the experience of using a modularized form of instruction, curriculum changes within the Paradental programs are being initiated. Modular instruction could be termed as having a "thawing" effect on existing dental curriculums.
7. Faculty members who instructed Paradental Training Contract students are currently serving as resource faculty to the Paradental/Paramedical faculty in areas such as development of content validation and evaluation of modular materials. In addition, they are consulted by other departments and other schools who are interested in a modular approach to instruction.

CHAPTER VI

RECOMMENDATIONS AND FUTURE DIRECTIONS

Many critics have pointed to the rigid sequencing of health care education as defeating its own purpose of producing quality trained workers in a minimal amount of time. This contract represents an attempt to explore ways in which the lack of vertical mobility could be eliminated.

Health education has been conservative in establishing open, flexible curricula which allow vertical mobility and self-paced instruction for the student. The Paradental Training Contract has made a small start in making career opportunities available for those who have acquired skills and knowledge through non-traditional (e.g., military) routes.

The success or failure of an individualized program rests almost entirely on the attitudes of the instructors and their administrator. Staff members who are convinced that modularized instruction will work find successful experiences. The staff's attitude is directly reflected by the students. Program administrators with a poor attitude toward modularized instruction are likely to have faculty and students who will also develop negative responses toward such instructional efforts. Faculty should be led, not pushed, into self-instructional techniques. The motivational thrust should come from the instructional staff.

Our experience would indicate that self-instructional or modularized techniques provide for a much closer interpersonal relationship between the student and instructor. This relationship, if effectively used, is probably the best single motivator to get desired results from students.

It is important that this interpersonal relationship include trust, interest, confidence, and warmth.

It is our opinion that the initial development begun under the auspices of the Paradental Training Contract should be expanded and continued.

1. Develop a truly individualized dental hygiene curriculum which would be adaptable to the varying skill and background levels of (a) military personnel seeking civilian careers; (b) disadvantaged individuals denied access to professional allied health careers because of social, cultural or ethnic reasons; (c) trained allied health professionals who seek changes in their occupational goals.
2. Faculty trained in modularized curriculum techniques should be further utilized and encouraged to use their expertise toward development of truly individualized programs in other allied health occupational programs.
3. Instructional materials developed should be evaluated by the federal government with a view toward making modular materials developed within this contract available to interested institutions.

APPENDIX A
ORIGINAL PARADENTAL TRAINING CONTRACT CURRICULUM

29

<u>Spring Term 1973 Phase I</u>	<u>Cl.</u>	<u>Cr.</u>	<u>Our ultimate goals **</u>
D.H. 118 Dental Hygiene I	8	4	modularized **
D.H. 119 Dental Hygiene 2	8	4	modularized
D.H. 109 Oral Roentgenology I	1	1	modularized **
D.H. 210 Oral Roentgenology 2	4	2	modularized
D.H. 113 Dental Anatomy	4	2	modularized **
D.H. 223 Disease Control I	1	1	modularized
Bi. 121 Anatomy & Physiology I	6	4	modularized **
Bi. 122 Anatomy & Physiology 2	6	4	modularized
Sp. 111 Speech, Fundamentals of	3	3	regular offering
	<hr/> 44	<hr/> 28	

<u>Summer, 1973 Phase I</u>			
D.H. 120 Dental Hygiene 3	6	2	clinical
D.H. 220 Dental Hygiene 4	9	3	clinical
D.H. 211 Oral Roentgenology 3	4	2	modularized
D.H. 225 Periodontology I	1	1	modularized **
D.H. 226 Periodontology 2	1	1	modularized **
D.H. 233 Anesthesiology	2	2	undecided
He 252 First Aid	3	3	challenge
Ch. 101 Elementary Chemistry	6	4	regular offering
Ch. 102 Elementary Chemistry	6	4	regular offering
Ch. 103 Elementary Chemistry	6	4	
	<hr/> 44	<hr/> 26	

<u>Fall, 1973 Phase I</u>			
D.H. Periodontology 3	1	1	modularized **
D.H. 221 Dental Hygiene 5	9	3	clinical
D.H. 130 Dental Procedures I	1	1	undecided
D.H. 131 Dent. Proc. (Materials)	3	1	probably modularized
Wr. III Eng. Composition	3	3	regular offering
FN 225 Nutrition	3	3	modularized offering **
Psy. 201 General Psychology	3	3	regular offering
P.E. 180 Physical Educ.	3	1	regular offering
Bi. 123 Elem. Microbiology	6	4	undecided
* D.H. 240 Dental Health Education	2	2	special offering
* D.H. 233 Pharmacology	2	2	modularized **
* D.H. 228 Oral Biology 1	4	2	regular offering
	<hr/> 40	<hr/> 26	

* Phase I and Phase II classes offered simultaneously
** Ready by the start of the appropriate term

Winter 1974 Phase I

	<u>Cl.</u>	<u>Cr.</u>	<u>Our ultimate goals</u>
* D.H. 241 Dental Health Ed. 2	1	1	special offering
* D.H. 229 Oral Biology	4	2	regular offering
* D.H. 232 Public Health	2	2	undecided
D.H. 222 Dental Hygiene 6	9	3	clinical
D.H. 242 Dental Health Ed. 3	4	2	off campus
D.H. 234 Dental Procedures 5	3	3	undecided
D.H. 212 Oral Roentgenology 4	3	1	modularized **
P.E. 190 Physical Education	3	1	regular offering
Psy. 202 General Psychology	3	3	regular offering
Wr. 112 English Composition	3	3	regular offering
	39	23	

Fall, 1973 Phase II

D.H. 118 Dental Hygiene 2	8	4	modularized **
D.H. 119 Dental Hygiene 2	8	4	modularized **
D.H. 109 Oral Roentgenology I	1	1	modularized **
D.H. 210 Oral Roentgenology II	4	2	modularized **
D.H. 113 Dental Anatomy	4	2	modularized **
D.H. 223 Disease Control I	1	1	modularized **
Bi. 121 Anatomy & Physiology I	6	4	modularized **
Sp. 111 Fundamentals of Speech	3	3	reg. offering
*D.H. 240 Dental Health Ed. I	2	2	special offering
* D.H. 233 Pharmacology	2	2	modularized **
* D.H. 228 Oral Biology	4	2	reg. offering
	43	27	

Winter 1974 Phase II

* D.H. 241 Dental Health Ed 2	1	1	special offering
* D.H. 229 Oral Biology	4	2	regular offering
* D.H. 232 Public Health	2	2	undecided
D.H. 120 Dental Hygiene 3	6	2	clinical
D.H. 220 Dental Hygiene	9	3	clinical
D.H. 211 Oral Roentgenology	4	2	modularized **
D.H. 225 Periodontology	1	1	modularized **
D.H. 226 Periodontology 2	1	1	modularized **
D.H. 223 Anesthesiology	2	2	modularized **
Wr. 111 English Composition	3	3	regular offering
Bi. 122 Anatomy & Physiology II	6	4	modularized **
	39	23	

* Phase I and Phase II classes offered simultaneously
 ** Ready by the start of the appropriate term

Spring Term, 1974 Phase II

	<u>Cl.</u>	<u>Cr.</u>	<u>Our ultimate goal</u>
D.H. 217 Periodontology 3	1	1	modularized **
D.H. 221 Dental Hygiene 5	9	3	clinical
D.H. 130 Dental Procedures 1	1	1	undecided
D.H. 131 Dent. Proc. (Materials)	3	1	probably modularized **
Wr. 212 Eng. Composition	3	3	regular offering
FN 225 Nutrition	3	3	modularized offering **
D.H. 234 Dental Procedures	3	3	regular offering
P.E. 180 Physical Education	3	1	regular offering
Bi. 123 Elementary Micro	6	4	modularized **
D.H. 242 Dental Health Ed. 3	4	2	off campus
D.H. 212 Oral Roentgenology 4	3	1	modularized **
D.H. 230 Oral Biology	4	2	regular offering
	<hr/> 42	<hr/> 24	

Summer Term, 1974 Phase II

D.H. 222 Dental Hygiene 6	9	3	clinical
P.E. 190 Physical Education	3	1	regular offering
Psy. 201 General Psychology	3	3	regular offering
HE 252 First Aid	3	3	challenge
Psy 202 General Psychology	3	3	regular offering
Psy 203 General Psychology	3	3	regular offering
Ch. 101 Elementary Chemistry	6	4	regular offering
Ch 102 Elementary Chemistry	6	4	regular offering
Ch 103 Elementary Chemistry	6	4	regular offering
	<hr/> 42	<hr/> 28	

* Phase I and Phase II classes offered simultaneously

** Ready by the start of the appropriate term

REVISED CURRICULUM
Paradental Training Contract Phase I

<u>Spring '73</u>		*H-C	<u>Fall '73</u>		
DH 113	Dental Anatomy	6-2	DH 250	Pharmacology	1-1
DH 118	Dental Hygiene I	8-4	DH 252	Public Health I	1-1
BI 121	Anatomy & Physiology	6-4	DH 225	Periodontology	1-1
DH 109	Oral Roentgenology I	1-1	DH 240	Dental Health Ed.	2-2
DH 223	Disease Control	1-1	DH 228	Oral Biology I	4-2
SP 111	Fundamentals of Speech	3-3	WR 111	English Composition	3-3
			FN 225	Nutrition	3-3
		<u>23-15</u>	DH 220	Dental Hygiene Clinic	9-3
			DH 211	Oral Roentgenology III	4-2
<u>Summer '73</u>					<u>28-18</u>
**BI 122	Anatomy & Physiology	6-4			
*DH 119	Dental Hygiene II	8-4	<u>Winter '74</u>		
CH 101	Elementary Chemistry	6-4	DH 251	Pharmacology II	1-1
*PH 210	Oral Roentgenology II	4-2	DH 253	Public Health II	1-1
Psy 201	General Psychology	3-3	DH 226	Periodontology II	1-1
			DH 241	Dental Health Ed. II	1-1
PE 180	Physical Education	3-1	DH 229	Oral Biology II	4-2
CH 102	Elementary Chemistry	6-4	DH 233	Anesthesiology	2-2
Psy 202	General Psychology	3-3	DH 130	Dental Procedures I	1-1
***DH 120	Dental Hygiene III	6-2	DH 230	Oral Biology III	4-2
			DH 221	Dental Hygiene Clinic	9-3
PE 190	Physical Education	3-1	DH 212	Oral Roentgenology IV	3-1
CH 103	Elementary Chemistry	6-4	DH 131	Dental Procedures	3-1
Psy 203	General Psychology	3-3			
		<u>57-35</u>			<u>30-16</u>
			<u>Spring '74</u>		
			DH 227	Periodontology III	1-1
			DH 234	Ethics & Specialties	3-3
			HE 252	First Aid	3-3
			DH 242	Dental Health Ed. III	4-2
			WR 112	English Composition	3-3
			BI 123	Elem. Microbiology	6-4
			DH 222	Dental Hygiene Clinic	9-3
					<u>29-19</u>

*H - Hours; C = Credits

**These courses will be started during Spring Term and completed in the first summer session.

***This course will be stretched out over an 8-week period during the second and third summer sessions.

REVISED CURRICULUM
Paradental Training Contract Phase II

<u>Fall '73</u>		<u>Summer '74</u>	
	*H-C		
FN 225 Nutrition	3-3	CH 101 Elementary Chemistry	6-4
— DH 228 Oral Biology I	4-2	Ch 102 Elementary Chemistry	6-4
DH 250 Pharmacology I	1-1	CH 103 Elementary Chemistry	6-4
DH 252 Public Health I	1-1	PSY201 General Psychology	3-3
— BI 121 Elementary Human Anat. & Phys.	6-4	PSY202 General Psychology	3-3
DH 223 Disease Control	1-1	PSY203 General Psychology	3-3
DH 118 Dental Hygiene I	8-4	PE 180 Physical Education	3-1
— DH 119 Dental Hygiene II	11-5	DH 221 Dental Hygiene V	12-4
DH 109 Oral Roentgenology I	1-1	DH 226 Periodontology II	1-1
DH 113 Dental Anatomy	4-2		
	<u>40-24</u>		<u>43-27</u>
<u>Winter '74</u>		<u>Fall '74</u>	
DH 229 Oral Biology II	4-2	WR 112 English Composition	3-3
DH 251 Pharmacology II	1-1	PE 190 Physical Education	3-1
— DH 253 Public Health II	1-1	SP 111 Fundamentals of Speech	3-3
DH 120 Dental Hygiene III	9-3	HE 252 First Aid	3-3
DH 233 Anesthesiology	2-2	DH 242 Dental Health Ed III	4-2
— BI 122 Elementary Human Anat. & Phys.	6-4	DH 222 Dental Hygiene VI	12-4
DH 210 Oral Roentgenology	4-2	DH 227 Periodontology III	1-1
DH 130 Dental Procedures	1-1	DH 212 Oral Roentgenology	3-1
DH 240 Dental Health Ed I	2-2		
— DH 230 Oral Biology III	4-2		<u>32-18</u>
DH 131 Dental Materials	3-1		
	<u>37-21</u>		
<u>Spring '74</u>			
— DH 234 Dental Procedures	3-3		
WR 111 English Composition	3-3		
BI 123 Elementary Microbiology	6-4		
— DH 220 Dental Hygiene IV	12-4		
DH 223 Periodontology	1-1		
DH 211 Oral Roentgenology	4-2		
— DH 241 Dental Health Ed II	1-1		
	<u>30-18</u>		

*H = Hours; C = Credits

APPENDIX C
ACADEMIC PROGRESS
REVIEW LETTER

**Lane
Community
College**

PARADENTAL TRAINING CONTRACT

4000 E. 30th Avenue
Eugene, Oregon 97405
(503) 747-4501

March 11, 1974

Recently, the Contract faculty reviewed and evaluated your academic progress in the Paradental Training Contract curriculum. Your progress has been judged to be satisfactory. If, however, you wish to meet with any faculty member to discuss questions about specific courses, please do so at your earliest convenience.

Please accept my best wishes for continued academic success.

Warm regards,

Douglas G. White

Dr. Douglas G. White
Department Chairman
Paradental/Paramedical Dept.

DCJ/ba
cc

APPENDIX D

ACADEMIC PROGRESS MEMO TO STUDENT

(Date)

M E M O R A N D U M

TO: (Student Name)

FROM: Program Coordinator

RE: Academic Progress

On January 15, you were notified in writing that deficiencies existed in Oral Biology I and Human Anatomy & Physiology I. As of this date, my records indicate that you have not completed the Human Anatomy & Physiology I course. You have indicated that even though you are presently enrolled, you elect not to complete Oral Biology III (DH 230) during the winter quarter, but prefer instead to take it with regular program students during the spring quarter, 1974.

My records indicate that you are not maintaining normal academic progress and are now also deficient in Human Anatomy & Physiology II. I have listed below the modules which my records show that you have yet to complete.

Human Anatomy & Physiology I

Human Skeleton
Human Musculature
Central Nervous System
Peripheral Nervous System

Human Anatomy & Physiology II

Introduction to Circulation
Hematology
General Circulation
The Human Heart
The Respiratory System
The Endocrine System

I am setting a deadline of May 17 for successful completion of the Human Anatomy & Physiology modules listed above. I am also setting a deadline of July 19 for your successful completion of the Human Anatomy & Physiology II modules.

In addition to the deadlines set forth above, I expect that you will enroll, maintain reasonable academic progress, and complete no later than June 7 the following courses which are scheduled for the spring of 1974.

DH 234 Dental Procedures (Ethics & Specialties)
DH 230 Oral Biology III
DH 120 Dental Hygiene III
DH 225 Periodontology I
DH 211 Oral Roentgenology
DH 241 Dental Health Education II
BI 123 Elementary Microbiology

This should give you a course load of 17 credit hours plus the makeup work which you have to complete. If you do not complete all of the work

APPENDIX D, (Continued)

specified by the July 19 deadline, it is expected that you will withdraw from this program.

On a positive side, please be aware that I am available for a reasonable amount of tutoring whenever you feel that you need help. I'm sure the other staff members are also willing to give you help in their areas. You do need to realize that the staff is not responsible for your graduation from this program. You and you alone bear that responsibility; we can only help.

cc: Student's file
Program Director
All Staff

My signature below indicates that I have read all the information contained in this memorandum and fully understand its implications. Further, I understand that if I do not meet the deadlines contained herein, that I will voluntarily withdraw from the Paradental Training Contract.

/signed/
(Student's Name)

APPENDIX E

RESPONSE TO LETTERS OF INQUIRY
FROM POTENTIAL STUDENTS**Lane
Community
College**

PARADENTAL TRAINING CONTRACT

4000 E. 30th Avenue
Eugene, Oregon 97405
(503) 747-4501

Thank you for your inquiry concerning the National Institutes of Health, Bureau of Health Manpower Education Training Contract. The purpose of the program is to offer that training which ex-military corpsmen/hygienists would require to upgrade their skills to qualify them as candidates for licensure in the State of Oregon and most other states as well.

The scope of our work has two major emphases. First, we are using a largely self-instructional or modular approach to L.C.C.'s existing, fully-accredited dental hygiene curriculum. Second, by using proficiency exams we are granting advanced placement for previous training. In other words, we are offering an alternate route to the two-year curriculum for these partially trained service personnel.

Our program is oriented toward those personnel who have actually been trained and have functioned as dental hygienists (i.e. superficial and deep scaling, patient education, oral prophylaxis). Previous college experience is beneficial but not required.

Ordinarily, dental hygiene students require a minimum of two academic years of study before becoming registered dental hygienists. Our pilot project is geared to produce a class of dental hygienists in 12-18 months of individualized study depending on their prior experience. We began our first class of trainees on March 26, 1973. Our second class of approximately 15 trainees will begin on September 18, 1973.

The terms of our contract stipulate that federal funding will terminate on August 28, 1974. The federal government has made no commitment to us beyond that date. While it is possible our modularized self-instructional, advanced-placement program could become a part of our regular two-year Dental Hygiene program; it is equally possible we would have no special program after that date.

Trainees will be required to pay regular in-district tuition (\$90.00 per term); but the Training Contract funds will pay any out-of-district or out-of-state fees in excess of ninety dollars per term. In addition, each trainee will receive a stipend for one hundred dollars worth of books and

Page 2
Letter

two hundred dollars worth of instruments and supplies. All trainees are eligible for G.I. Benefits and L.C.C. Scholarship funds.

I am enclosing the required application and recommendation forms. You should complete and return them as quickly as possible, but no later than August 1, 1973. I am also enclosing a copy of our regular program curriculum which is ADHA approved. It should help guide you to those college courses which would be transferable to any U.S. dental hygiene school, including ours, should you wish to pursue a career in Dental Hygiene outside our pilot project.

Thanks again for your inquiry.

Sincerely,

Robert J. Boettcher
Program Coordinator
Paradental Training Contract

RJB/ba

Enclosures:

- Application
- Recommendation Form
- Return Envelope
- Curriculum Listing
- Financial Aids Brochure
- P.R. Brochures

Dear _____

On _____ an application was sent to you for entry into the Paradental Training Contract for Dental Hygienists. As of this date we have not received your application and would like to know if you are still interested in applying for admission to the program.

A return envelope is enclosed for your reply. (Please use the bottom portion of this sheet for your reply).

Thank you



Robert J. Boettcher, Program Coordinator

APPENDIX F
APPLICATION FORM

APPLICATION FOR TRAINEESHIP
PARADENTAL TRAINING CONTRACT

(LCC-NIH # 72-4341)

NAME _____ (1)
 (Last) (First) (Initial)

DATE OF BIRTH: _____ (2)

CURRENT MAILING ADDRESS: _____ (3)

 (CITY) (STATE) (ZIP)

HOME PHONE: _____
 (AREA CODE)

WORK PHONE: _____ (4)
 (AREA CODE)

APPLICATION FOR ADMISSION TO CLASS BEGINNING:

Sept. 18, 1973

SOCIAL SECURITY NUMBER _____ / _____ / _____ (5)

SOCIAL SECURITY NUMBER: _____/_____/_____

Are you currently under indictment for, or have you ever been convicted of, a felony? _____.

Briefly describe your general health.

Indicate specific emotional or physical problems or disabilities, if any.

NOTE: Enter complete information for each period of active duty and attach a copy of Form D.D. 214 and other separation papers for all periods of active duty since January 31, 1955. Enter the last period on the first line. (Failure to furnish forms DD 214 or other separation papers may delay action on your application.)

Service No. (Prefix & Suffix) (6)	Branch of Service (7)	Date Entered Active Duty (8)	Date Separated from Active Duty (9)	Type of (10) Separation or Discharge	Grade or Rank at Separation or Discharge

Present Military Status (12)	If Member of Reserve give Terminal Date (13)		Branch of Service (14)
	If completely Separated Give Terminal Date of Reserve Obligation (15)	If on Retired Status (16) () Pay Status () Non-Pay Status () Member Temporary Disability Retired List	Branch of Service

Separation Date:	
------------------	--

What was the skill level held at discharge or retirement? _____ (17)

What was your pay grade at discharge or retirement? _____ (18)

How long did you hold that skill level (rating)? _____ (19)

List all other duty skills acquired on active duty. (Include: MOS, AFSC or NEC) _____ (20)

SOCIAL SECURITY NUMBER _____ / _____ / _____

EDUCATION OR TRAINING RECEIVED WHILE ON ACTIVE DUTY

SERVICE ACADEMIES (21)	() USMA (WEST POINT) () USNA (ANNAPOLIS)	() USCGA (NEW LONDON) () USAFA (COLORADO SPRINGS)	DATES ATTENDED		DEGREE
			FROM	TO	

OTHER SERVICE SCHOOLS (22)	NAME & ADDRESS OF SCHOOLS	DESCRIPTION OF SUBJECTS COVERED OR COURSE TITLES	DATES ATTENDED	
			FROM	TO

CIVILIAN SCHOOL ASSIGNED AS PART OF MILITARY DUTY (23)	NAME & ADDRESS OF SCHOOL	DESCRIPTION OF SUBJECTS COVERED OR COURSE TITLES	DATES ATTENDED		DEGREE
			FROM	TO	

SOCIAL SECURITY NUMBER _____

CIVILIAN EDUCATION

Name and Address of High School	Dates attended		Place X in block indicating highest grade completed (24)	Did you Graduate? (25)
	From	To		
			() () () () 1 2 3 4	() Yes
			() () () () 5 6 7 8	() No
			() () () () 9 10 11 12	

If you did not graduate, do you have a high school equivalency diploma? _____ (26)

Date of equivalency diploma _____

Name and address of institution granting equivalency diploma

Enclose copies of your high school transcripts (or G.E.D. certificate) and any post high school transcripts (Photocopies are acceptable)

Name of College or University and Zip Code (27)	City, State	Dates Attended	Credit Hours (28)	Degree (29) Received	Name or Description of Course

Other School Courses (not already described) For example, vocational, trade, or correspondence) (30)	Dates Attended	Credit Hours (31)	Degree Received (32) (certificate)	Description of Course

Name of Apprentice or other on the job training Course (33)	Dates of Training To From	Place of Training

SOCIAL SECURITY NUMBER _____/_____/_____

Have you ever held a license to practice a profession or journeyman rating to work at a trade? (Examples, electrician, radio operator, teacher, lawyer, CPA, bricklayer, carpenter, etc.) (34) Yes () No ()

Name of License or Journeyman rating _____

State in which held _____.

How do you intend to finance your education and support yourself during your training? Check as many as apply (35)

Part time work ()
 G.I. bill ()
 Financial Aids from
 LCC ()
 Social Security ()
 Retirement ()
 Other (explain) ()

List three individuals we may contact for personal and professional references.

Name	Address	Phone	Relationship to you
1.			
2.			
3.			

Describe any other training or experience which you think would enhance your chances of admission to this program.

USE THE BACK OF THIS PAGE FOR THE FOLLOWING
INFORMATION.

Describe your dental-related work experience, including schools, beginning with the MOST RECENT job or assignment and proceeding backwards. For each listing be sure to include the following:

1. Post
2. Name and rank of the Chief of Dental Services (or Chief of the Clinic) (essential only for last duty station)
3. Length of time in that assignment
4. Approximate dates in that assignment
5. Specific duties assigned & tasks performed
6. Specific responsibilities delegated to you
7. Other pertinent information

STATE OF _____
COUNTY OF _____ } ss.

I, _____, depose and say that I am the person above described and identified; that I have not engaged in any of the acts prohibited by the statutes of the State of Oregon, particularly those acts set forth in ORS chapters 679 and 680.

I hereby authorize all hospitals, institutions, or organizations, my references, personal physicians, employers (past and present), business and professional associates (past and present) and all governmental agencies and instrumentalities (local, state, federal or foreign) to release any information files or records requested in connection with the processing of this application. I further authorize release to the organizations, individuals and groups listed above any information which is material to my application.

I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind, and I declare under penalty of perjury that my answers and all statements made by me herein are true and correct. Should I furnish any false information in this application, I hereby agree that such act shall constitute cause for the denial, suspension or revocation of my traineeship position. I further agree to return any and all monies, materials, instruments and books should I fail to complete the traineeship program for any reason.

SIGNATURE

Subscribed and sworn to before me this _____ day of _____, 19____.

Notary Public for _____

My commission expires: _____

APPENDIX G
FOLLOW-UP TO APPLICATION FORM

Dear _____

On _____ an application was sent to you for entry into the Paradental Training Contract for Dental Hygienists. As of this date we have not received your application and would like to know if you are still interested in applying for admission to the program.

A return envelope is enclosed for your reply. (Please use the bottom portion of this sheet for your reply).

Thank you



Robert J. Boettcher, Program Coordinator

APPENDIX H
LETTER OF ACCEPTANCE

**Lane
Community
College**

4000 E. 30th Avenue
Eugene, Oregon 97405
(503) 747-4501

July 9, 1973

Congratulations!

After a thorough review of all applicants' records, you were selected as a member of the second Paradental Training class. You may consider this letter as your official acceptance.

Classes will begin on 24 September, 1973. You should try to be here by 18 September for registration, orientation, and placement exams. Your arrival on campus later than 24 September could jeopardize your success in this modularized, highly accelerated program.

You will have time to seek housing during the week 18-24 September as your days will not be completely scheduled. I should warn you however, that Eugene is a university town and the housing situation tends to become rather restricted in the early weeks of September. This is especially true of housing suitable for families. An added note, the local elementary and secondary school districts begin classes on September 4th or September 5th, depending upon which school district you choose to live in.

You should NOT plan to work part-time while you are in this program. You will be carrying from 18-22 hours every term that you are here. The original intent within this contract was to retrain experienced, military dental personnel in less than the two academic years normally required in a civilian program. Our experience with the first class indicates that your training will last approximately fifteen months.

Trainees will be required to pay regular in-district tuition (\$90.00 per term) but the training contract funds will pay any out-of-district or any out-of-state fees in excess of \$90.00 per term. In addition, each trainee will receive a stipend for \$100.00 worth of books and \$200.00 worth of instruments and supplies. At registration time, you must present evidence of having had a tuberculin skin test (Mantoux) or a chest X-ray within the past year. Your military shot record would be sufficient proof if the test is less than one year old.

Now, a few words about G.I. Bill benefits. As an L.C.C. student, you are fully eligible for G.I. benefits and all L.C.C. scholarship funds. The L.C.C. Veterans' Counselor tells me that there are two routes to go

relative to your G.I. Bill benefits:

1. If you have never used the G.I. Bill benefits before, you must complete the form 21E-1990 enclosed. In spaces 21-24, you must present proof of the present marriage and dependents only if you have been previously married. Acceptable proof would be copies of a marriage license and dependant birth certificates. If the present marriage is a first marriage, the V.A. will accept your simple declarations of marriage without proof. Mail the forms to the Veterans' Counselor, Lane Community College as soon as possible so that your forms may be processed and your monies hurried on their way to you. If these forms are processed before 1 August, your first check will be ready by 1 October.
2. If you have used any of your entitlement at another school, you must complete form 22-1995 enclosed. Mail the completed form to the regional V.A. office where your records are currently held (i.e. in the state where you last attended school). Insert Dental Hygiene in space 17 and Associate of Science in space 19. Fill out a duplicate of form 22-1995 to bring with you for use at registration time.

If you elect not to follow the suggestions above, you should receive your first G.I. Bill check about mid November.

YOU MUST NOTIFY OUR OFFICE IN WRITING BY 1 AUGUST IF YOU INTEND TO ACCEPT THIS TRAINEESHIP. YOUR PLACE WILL BE GIVEN TO YOUR ALTERNATE IF WE DO NOT HEAR FROM YOU.

We will be sending you the names and addresses of the other trainees very shortly. You may wish to contact some of them to share apartments, transportation, etc.

If there are any questions or comments that you have, please don't hesitate to call us at (503) 747-4501 Ext. 294, or write to Paradental Training Contract, Lane Community College, 4000 E. 30th Ave., Eugene Oregon 97405.

Sincerely,

Robert J. Boettcher

Robert J. Boettcher
Program Coordinator
Paradental Training Contract

RJB/ba
Enclosures
cc

APPENDIX I
TERMINATION OF PROJECT LETTER

**Lane
Community
College**

PARADENTAL TRAINING CONTRACT
P.O. Box 1E
Eugene, Oregon 97401
(503) 747-4501

Thank you for your inquiry about our special pilot project for retraining ex-military dental personnel. The terms of our contract with the Division of Dental Health at HEW stipulate that we will be funded only through August, 1974. Consequently, our classes are already filled and there are no openings for alternates. The federal government has made no further commitment of funds to us. It is probable therefore that our pilot project will terminate in August, 1974.

I am enclosing a copy of our regular college curriculum which is ADHA approved. It should help guide you toward courses at other colleges which would be transferable to any dental hygiene school in the United States.

Another avenue you might pursue is to write to the State Board of Dental Examiners in West Virginia. They have recently instituted a system whereby ex-military dental personnel may be examined for licensure as dental hygienists without any formal civilian schooling.

I regret that we could not be of more help to you. If there is anything further that I might do, don't hesitate to write.

Sincerely,

Robert J. Boettcher

Robert J. Boettcher
Program Coordinator
Paradental Training Contract

RJB/ba
cc
Enclosure (1)

UNIVERSITY OF CALIF.
LOS ANGELES

OCT 22 1976

CLEARINGHOUSE FOR
JUNIOR COLLEGES