

Council of Interstate Testing Agencies, Inc.

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GENERAL INFORMATION 2010 EXAMINATION CYCLE

****BE SURE TO READ AND PRINT ALL INSTRUCTIONS, AS THEY CONTAIN IMPORTANT INFORMATION AND FORMS****

Applications to sit for any CITA examination must be received in the CITA office by the appropriate deadline. POSTMARKS WILL NOT BE ACCEPTED. Applications received after the filing deadline will not be accepted and will be returned.

1. Examination Dates and Locations

Candidates should consult CITA's website (<http://www.citaexam.com>) for information concerning specific dates and locations for the CITA examination. CITA examinations will be offered at those dental schools where contractual arrangements have been made with CITA to conduct such examinations.

2. Examination Administration

As a general rule the CITA examination is administered in its entirety over the course of two (2) days. Parts II and III are given in conjunction with each other and during the course of one (1) day. Similarly, Parts IV and V are given in conjunction with each other during the course of one (1) day. The examination Parts are:

- Part II – Manikin-Based Endodontics Examination
- Part III – Manikin-Based Fixed Prosthodontics Examination
- Part IV – Patient-Based Periodontal Examination
- Part V – Patient-Based Restorative Examination

3. Candidate Eligibility for the CITA Examination

A. Licensed Dentists

Any licensed dentist is eligible to take the CITA examination.

B. Dental Student Eligibility for the CITA Examination

Junior or senior students of record attending dental schools accredited by the American Dental Association Commission on Dental Accreditation (CODA) or the Commission on

Dental Accreditation of Canada (CDAC) are eligible to apply to take the CITA examination when the Dean (or designated school official) certifies, in writing, that the candidate is a junior or senior student of record and that the candidate is sufficiently prepared to participate in the examination.

C. Post-Graduate Dental Residents or Dental School Graduates

Post-graduate dental residents and dental school graduates must submit a letter from the registrar's office of the dental school from which they graduated stipulating their date of graduation and degree received or an official final school transcript. Whichever document is used, it must be in a sealed envelope from the school.

4. Obtaining and Submitting Applications

A. Submission of Applications On-line

Candidates may complete the examination application via the internet on CITA's website (<http://www.citaexam.com>). For applications completed on-line via the internet, candidates will have ten (10) business days after submission of the application, to submit the necessary fees, photographs and documentation as set forth in the CITA candidate examination manual.

B. Submission of Hardcopy Applications

Candidates may download a PDF file copy of the CITA application via the internet on CITA's website (<http://www.citaexam.com>) or by requesting an application from the CITA office.

In order for a hardcopy application to be processed, the completed application, supplemental documentation and appropriate fees **MUST** be received on or before the deadlines specified in the following section for the examination being applied for. **APPLICATIONS RECEIVED AFTER THE REQUIRED DEADLINE WILL NOT BE ACCEPTED FOR PROCESSING AND WILL BE RETURNED TO THE APPLICANT.** It should be noted that CITA uses the date of receipt and **NOT** the postmark date of the US Postal Service or other delivery agency. **CITA DOES NOT assume responsibility for problems related to insufficient postage or delays due to the United States Postal Service or other delivery agencies**

TELEPHONE CONFIRMATION IS NOT PROVIDED UNDER ANY CIRCUMSTANCES, AND CANDIDATES ARE STRONGLY ADVISED TO MAIL APPLICATION PACKETS VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED.

It is in a candidate's best interest to submit his/her completed application, fees and required documents well in advance of the filing deadline to assure adequate time for resubmission of a returned application where there may be an unforeseen problem.

5. Test Related Fees

a. **Initial Examination Fee**

The examination fee for Sessions I and II (Parts II, III, IV and V) of the CITA examination is \$1,800.00 (\$900.00 manikin-based examination; \$900.00 patient-based examination). **ONLY CASHIER'S CHECK, CERTIFIED CHECKS OR MONEY ORDERS WILL BE ACCEPTED.** For applications that are mailed to CITA via the US Postal Service or another delivery agency, the examination fee **MUST** accompany the application, **MUST** be for the exact amount, **MUST** be made payable to CITA and **MUST** be paid by cashier's check, certified check or money order with the candidate's name written in the lower left-hand corner of the check or money order. For applications submitted on-line, the examination fee **MUST** be received within ten (10) business days after submission of the application.

b. **Retest Examination Fee**

Candidates who are unsuccessful on any Part of the examination must submit a new application and pay an \$900.00 retest fee to retake either or both Parts of the Manikin Based examination and/or \$900.00 to retake either or both Parts of the Patient Based examination. For applications that are mailed to CITA via the US Postal Service or another delivery agency, the examination fee **MUST** accompany the application, **MUST** be for the exact amount, **MUST** be made payable to CITA and **MUST** be paid by cashier's check, certified check or money order with the candidate's name written in the lower left-hand corner of the check or money order. For applications submitted on-line, the examination fee **MUST** be received within ten (10) business days after submission of the application.

c. **Administrative Fee for Returned Applications**

A \$100.00 administrative fee is deducted from all returned application fees and is non-refundable. Re-submissions of applications which have been returned for any reason must contain an additional administrative fee of \$100.00.

d. **Fee Deferrals and Refunds**

Under extenuating circumstances, and on an individual basis, a request for the examination fee to be deferred to a later examination or refunded will be considered when the request is **RECEIVED AT LEAST FIVE (5) BUSINESS DAYS BEFORE THE INITIAL SCHEDULED EXAMINATION DATE.** Requests **MUST** be made in writing to CITA and **MUST** include original documentation reflecting good cause for the request. Notification will be sent immediately after a determination is made. Should a fee deferral be granted, the terms and conditions for a future examination will be included. Requests for a fee deferral or refund received on or after the date outlined above **WILL NOT** be honored, and all fees will be forfeited. A non-refundable administrative processing fee of \$100.00 is applicable at all

times and under all circumstances. It should be noted by candidates that a request for and the granting of a deferral does not guarantee seating at the candidates requested examination site. Such seating will be assigned in accordance with guidelines set forth in #7 below.

e. Testing Site/Dental School Usage Fees

Candidates should be aware that dental schools customarily assess facility usage, equipment, instrument and/or supply fees to candidates participating in an examination being administered at that dental school. These fees may vary from dental school-to-dental school and are not part of the CITA application fee. In some instances CITA collects such fees on behalf of the dental Schools and candidates will be required to submit such fees at time of application. Specific information regarding site fees is included in the application packet and is contained on CITA's website (<http://www.citaexam.com>).

Candidates taking the examination at a test site other than one they are familiar with are **STRONGLY** encouraged to arrange with the school a visit to the testing site prior to the time of the examination.

6. Registration Deadlines and Filing Fees

a. First Time Test Takers

All candidates, including junior and senior pre-graduation student candidates, who are filing to take a CITA examination for the first time must file a complete application not less than **ninety (90)** days before the date of the examination the candidate wishes to take. For applications submitted on-line, the necessary fees and required documentation **MUST** be received within ten (10) business days after submission of the application. For applications submitted via the US Postal Service or another delivery agency, the application, necessary fees and required documentation **MUST** be received by the ninety (90) day deadline. Seating for such initial filings will be filled in accordance with the order of priority set forth in #7 below.

All candidates who are filing to take the CITA examination for the first time, with the exception of junior students, must submit an examination fee of \$1,800.00 along with the necessary, if applicable, facility fees and/or staffing fees as outlined in the application packet and/or CITA's website. Junior pre-graduation students must submit an examination fee of \$900.00 for the manikin-based examination along with the necessary, if applicable, facility fees and/or staffing fees as outlined in the application packet and/or CITA's website.

b. Retest Examinations

Candidates who are filing for a retest opportunity must file a complete application not less than thirty (30) days before the date of the examination the candidate wishes to take. For applications submitted on-line, the necessary fees and two (2) passport size photographs **MUST** be received within ten (10) business days after submission of the application. Seating for retest candidates who file less than ninety (90) days before the examination date will be

filled based on the date of receipt as set forth in the following section. Any retest candidates who file more than ninety (90) days before the date of the examination that candidate wishes to take will have seats assigned in accordance with the order of priority set forth in #7 below.

Candidates who have failed either Part II and/or III (Session 1) or Part IV and/or V (Session 2) must pay a retest examination fee of \$900.00 for each testing session but not for each Part.

7. Seating Assignment Priorities

A candidate who wishes to take the CITA examination for the first time must file at least ninety (90) days before the date of the examination that he/she wishes to take. Such candidates are assigned seating at a particular test site in the following order of priority: (1) eligible students of record enrolled in the undergraduate program at the dental school at which the examination will be given; (2) eligible students of record enrolled in a graduate (post-graduate) program at the dental school at which the examination will be given; (3) eligible students of record enrolled in an undergraduate program at a dental school located in another CITA Member State that has chosen to participate in the pre-graduation examination; (4) eligible students of record enrolled in a graduate (post graduate) program at a dental school located in another member CITA state; (5) graduates who are citizens of a CITA member state; (6) all other eligible students currently enrolled in dental school; and (7) all other dental school graduates.

Candidates who file for a CITA retest at least ninety (90) days before the examination that he/she wishes to take will also be assigned seating in the order of priority outlined above.

Since there is often less than ninety (90) days between a failed examination and a retest examination being applied for, retest applications may be filed up to thirty (30) days before the examination being requested. However, seating for such candidates will be limited to the remaining seats following assignments to the ninety (90) day applicants and will be assigned in the order that applications are received until all available seating is exhausted.

Although candidates may request a specific testing site with their application, CITA will honor that request subject to the priorities set forth above and site assignments will be at CITA's sole discretion.

8. Requests for Non-standard Test Accommodations

Any candidate with a documented condition that impairs sensory, manual, or speaking skills, which requires a reasonable deviation from the normal administration of the examination, may be accommodated. All reasonable efforts will be used to administer the examination in a place and in a manner accessible to such candidates, or an attempt will be made to offer alternative accessible arrangements for such candidates. Efforts will be made to ensure that the examination results accurately reflect the individual's impaired sensory, manual, or speaking skills, except where those skills are factors the examination purports to measure. Also, attempts will be made to provide appropriate auxiliary aids for such persons with impaired sensory, manual, or speaking skills unless providing such auxiliary aids would

fundamentally alter the measurement of the skills or knowledge the examination is intended to test or result in an undue burden on CITA or the testing site.

To ensure that an auxiliary aid or other requested modification exists and can be provided, it is a requirement that candidates requesting non-standard test accommodations provide the following with their applications:

- A written request documenting the need for the auxiliary aid or test modification.
- Supporting documentation of the need for the auxiliary aid or test modification. If the candidate is a student in an accredited dental school that documentation may consist simply of a letter from a school official indicating accommodations being provided by the dental school and the basis for that accommodation; or, if the candidate is not a student in an accredited dental school that documentation may be a letter from an appropriate health care professional indicating the accommodation needed and the basis for that need. However, CITA reserves the right to require additional documentation when it feels the documentation submitted fails to justify the accommodation being requested.
- Written information stipulating the exact auxiliary aids or examination modifications required and the exact portion(s) of the examination for which such auxiliary aid or modification will be required.

Requests received after the application deadline date or retroactive requests will not be considered. In providing such auxiliary aids or examination modifications, CITA reserves the ultimate discretion to choose between effective auxiliary aids or examination modifications and, further, reserves the right to maintain the security and integrity of the examination. All information obtained regarding a candidate's condition will be kept confidential except as follows:

- Authorized individuals administering the examination may be informed regarding any auxiliary aid or examination modification.
- First aid and safety personnel at the testing site may be informed if the candidate might require emergency treatment.

10. Interpreters

Candidates can employ the services of an interpreter for their patients who do not speak English or who are hearing impaired with a hearing loss which cannot be corrected. (This is particularly important when the patient has a history of medical problems or is on medications.) Interpreters may be related to a patient but in all cases an interpreter must be at least eighteen (18) years old (nineteen (19) years old in Alabama and twenty one (21) years old in Puerto Rico).

Candidates may not share an interpreter during each Part of the examination. All interpreters that are utilized by a candidate during the course of the examination will be required to wear a photo identification badge. Two (2) weeks prior to the scheduled examination, candidates will be required to submit to the CITA office an “Interpreter Form”, that states the candidate’s name, interpreter’s name and contact information and the candidate’s patient’s name along with two (2) passport size photographs. Interpreters will be required to wear the identification badge at all times while on the clinic floor and assisting the patient in the grading station. An interpreter will be not be permitted to assist a candidate and his/her patient if he/she does not have a CITA issued photo identification badge.

Candidates are responsible for the conduct of their interpreter during the examination. While there is no strict dress code for interpreters, candidates must be mindful of the fact that the examination site is a professional setting and all personnel should be appropriately dressed. Inappropriate dress would include short shorts, tank tops and/or halter-tops.

Candidates should also be mindful of the fact that CITA is committed to providing a safe and secure examination site. Therefore, CITA requires that:

- a. all interpreters must appear for the examination with full facial exposure.
- b. mustaches and beards are acceptable for male interpreters as long as the photograph is reflective of the interpreter’s facial condition at the time of the examination.
- c. cosmetics are acceptable for female interpreters on both the photograph and at the examination as long as the photograph readily permits identification of the interpreter at the examination.
- d. dark sunglasses will not be permitted at the examination. Transitional lenses are permitted.
- e. coats, jackets, and other bulky clothing will not be permitted in the clinic area.

Faculty members, candidate assistants, dentists, and dental hygienists (licensed or unlicensed), fourth year dental students, and final year dental hygiene students may not act as interpreters during the patient-based examinations.

The Interpreter Form can be found in the application information packet or can be downloaded from the CITA website at (<http://www.citaexam.com>) or obtained by

contacting the CITA office. All interpreters will be required to have a CITA issued identification badge and will be required to wear the badge at all times while on the clinic floor. The badge will be provided in the candidate examination packet on the day of the scheduled examination. Failure to timely provide or comply with the items listed above to the CITA office will result in the interpreter being prohibited from participating in the examination.

11. Use of Auxiliary Personnel

Auxiliary personnel **ARE** permitted to assist at chairside during the patient-based examinations. Dentists and dental hygienists (licensed or unlicensed), fourth year dental students, final year dental hygiene students, dental technicians, employees of the School where the examination is being administered and expanded duty auxiliaries (if providing services normally done by a dentist) may not act as chairside assistants during the patient-based examinations. Auxiliaries are not permitted to function as expanded duty assistants. For each clinical procedure, the candidate must list the name of his/her assistant on the Progress Form, and candidates are responsible for the conduct of their auxiliaries during the examination. Failure to follow this guideline will result in failure of the examination currently being taken by the candidate.

Candidates will be required to submit to the CITA office within thirty (30) days of the examination, a completed Dental Assisting Form and two (2) passport-size photographs of their assistant(s).

Photographs of assistants are used both for identification and security purposes. Therefore photographs must be consistent with the appearance of the assistant at the time of the examination. To insure this, the following rules apply:

- a. the photograph must reflect full facial exposure and assistants must appear for the examination with full facial exposure.
- b. mustaches and beards are acceptable for male assistants as long as the photograph is reflective of the assistant's facial condition at the time of the examination.
- c. hair length for male and female assistants must be basically consistent in length and color between the photograph and appearance at the examination.
- d. cosmetics are acceptable for female assistants on both the photograph and at the examination as long as the photograph readily permits identification of the assistant at the examination.
- e. dark sunglasses will not be permitted on either the photograph or at the examination. Transitional lenses are permitted.

The Dental Assisting Form can be found in application information packet or can be downloaded from the CITA website at (<http://www.citaexam.com>) or by contacting the CITA office. All auxiliary personnel will be required to have a CITA issued identification badge and will be required to wear the badge at all times while on the clinic floor. The badge will be provided in the candidate examination packet on the day of the scheduled

examination. Failure to timely provide *or comply with* the items listed above to the CITA office will result in the assistant being prohibited from participating in the examination.

12. Examination Cancellation Policy

CITA reserves the right to cancel or postpone any examination where the number of candidates registered to take the examination does not, in the sole discretion of CITA, financially justify the administration of the CITA examination or in the event of an emergency or other unforeseen circumstance that is beyond CITA's control. Emergency or unforeseen circumstances may include, but are not limited to, acts of nature, acts of terrorism, events resulting in the destruction of CITA office or testing site facility, loss or delays in the delivery of necessary equipments and/or supplies by a shipping agent, failure of the testing site facility to provide expected and necessary services, equipment, supplies or personnel or other similar events.

Under no circumstance does CITA assume liability for costs incurred by candidates in preparing to take a CITA examination. This policy extends to situations where CITA might be forced to cancel an examination because of an emergency or unforeseen circumstance such as those listed above or for the lack of participants as explained above. However, if such an examination cancellation were to occur for those reasons stated or any reason in CITA's sole discretion, CITA would either refund those candidates application fees or reassign candidates to the next available examination site or reschedule the examination at the earliest possible date.

CITA 2010 Application Completion

An application packet may be obtained from the CITA website at (<http://www.citaexam.com>) or by contacting the CITA office. All applications with incorrect, missing information (e.g., social security number, dental school dean certification of status as a junior or senior student of record, etc.) or illegible will be returned to the candidate. **Candidates who complete the application on-line and who do NOT submit the necessary corresponding application materials by the ten (10) day deadline, their application will become null and void and the candidate will be required to resubmit another completed application.**

If an application is returned for any reason, it will not be accepted if returned to CITA after the filing deadline. In addition, a resubmitted application will not be accepted without including the \$100.00 administrative fee.

1. Initial Examination Application

Candidates applying for the first time must submit a completed application along with the following:

- appropriate examination fee (\$900.00 patient-based examination; \$900.00 manikin-based examination);
- appropriate facility and/or staffing fees, if applicable;
- two (2) passport size photographs (2" x 2") taken within the last six (6) months; and
 - certification of junior/senior status **OR**
 - a letter from the registrar's office stating the degree received and the date of graduation **OR**
 - final school transcripts with the date of graduation and degree received.

For applications submitted by the US Postal service, these documents must accompany the application. For applications submitted on-line, these documents must be submitted within ten (10) business days after application submission.

2. Retest Examination Application

Candidates applying for a retest examination must submit a completed application along with following

- appropriate examination fee (\$900.00 for Parts II and/or III) and/or (\$900.00 for Parts IV and/or V);
- appropriate facility and/or staffing fees, if applicable; and
- two (2) passport size photographs (2" x 2") taken within the last six (6) months.

Candidates do NOT need to resubmit certification of junior/senior status, a letter from the registrar's office stating the degree received and the date of graduation or final school transcripts with the date of graduation and degree received.

For applications submitted by the US Postal service, these documents must accompany the application. For applications submitted on-line, these documents must be submitted within ten (10) business days after application submission.

3. Candidate Photographs

As indicated above, candidates must provide two (2) color passport-size photographs taken within the last six (6) months. One photograph is used in preparation of the candidate's identification badge and the other becomes a part of that candidate's permanent record. Photographs from a previous examination cannot be re-used and, therefore, new photographs will be required for all retest applications. **PLEASE NOTE THAT ONLY PASSPORT-SIZE PHOTOGRAPHS WILL BE ACCEPTED!**

Candidate photographs are used both for identification and security purposes. Therefore photographs must be consistent with the appearance of the candidate at the time of the examination. To insure this, the following rules apply:

- a. The photograph must reflect full facial exposure and candidates must appear for the examination with full facial exposure.
- b. Mustaches and beards are acceptable for male candidates as long as the photograph is reflective of the candidate's facial condition at the time of the examination.
- c. Hair length for male and female candidates must be basically consistent in length and color between the photograph and appearance at the examination.
- d. Cosmetics are acceptable for female candidates on both the photograph and at the examination as long as the photograph readily permits identification of the candidate at the examination.
- e. Dark sunglasses will not be permitted on either the photograph or at the examination. Transitional lenses are permitted.

4. Dental School Certification

a. Junior or Senior Dental Students

As previously noted, junior or senior dental students may not participate in a CITA examination unless a certification by the dental school dean (or designee) is attached to the candidate's application certifying that the candidate is a junior or senior dental student of record and that the candidate is sufficiently prepared to take the examination. Junior dental students may only take Parts II and III, and are not eligible to take Parts IV and V until they are senior dental students of record.

Senior dental students may apply for the CITA examination before graduation but will NOT be allowed to take the examination until they provide to CITA either a certification by the dental school dean (or designee) that the candidate is sufficiently prepared to take the examination or proof of graduation in the form of a letter from the Registrar's office of the dental school from which they graduated stipulating their date of graduation and

degree received OR an official final dental school transcript. Whichever documentation is used, it must be in a sealed envelope from the school.

b. Post-Graduate Dental Residents or Dental School Graduates

Post-graduate dental residents and dental school graduates must submit a letter from the registrar's office of the dental school from which they graduated stipulating their date of graduation and degree received OR an official final school transcript. Whichever documentation is used, it must be in a sealed envelope from the school.

5. Social Security Number

The candidate's social security number should be recorded accurately and legibly on the application form. The social security number becomes the candidate's permanent computer identification number and records for that candidate will be maintained by both CITA and the licensing jurisdiction by that number. Applications which do not include the social security number will be returned as incomplete. However, candidates participating in this examination who come from jurisdictions outside the United States and who do not possess social security numbers should attach a statement to this effect with their completed application.

DENTAL SCHOOL CODES

The following information is provided to aid the candidate in completing his/her application for CITA's examination. The candidate should locate the name of his/her school of graduation and place the school's corresponding numerical code on the application. Schools in those states affiliated with CITA have been bolded.

ALPHABETICAL LIST OF DENTAL SCHOOLS AND CODES

513-Algonquin College of Applied Arts and Technology	300-Allegany College of Maryland
301-Amarillo College	302-Armstrong State College
303-Asheville-Buncombe Technical Institute	304-Ashland Community College
501-Baker College	305-Baltimore City Community College
010-Baylor University	306-Bee County College
307-Bergen Community College	180-Boston University
951-Boyne School of Dental Science Creighton	309-Brevard Community College
310-Bristol Community College	311-Broome Community College
908-Broward Community College	312-Cabrillo College
499-Cambrian College	313-Camden County Community College
900-Canadian School Graduate	508-Canadore College (North Bay Ontario)
319-Cape Cod Community College	518-Carl Sandburg College
320-Carroll College	133-Case Western Reserve University
498-Cegep Saint-Hyacinthe	321-Central Piedmont Community College
322-Central Technical Community College	323-Cerritos College
324-Chabot Community College	325-Chattanooga State Technical Community College
326-Clark College	327-Clayton State College
328-Coastal Carolina Community College	502-College De Maisonneuve (Canada)
519-College of DuPage	516-College of Lake County, Grayslake, IL
026-Colorado College of Dentistry	329-Colorado Northwestern Community College
027-Columbia University	330-Columbus College
515-Columbus State Community College DH Program	507-Community College of Denver
331-Community College of Philadelphia	332-Community College of Rhode Island
333-Community College of Southern Nevada	957-Confederate College of Arts and Technology
030-Creighton University	334-Cuyahoga Community College
335-Cyprus College	031-Dalhousie University
336-Darton College	510-Dayton Beach Community College
338-Delaware Technical Community College	339-Delmar College
340-Delta College	032-Denver College of Dentistry
341-Des Moines Area Community College	342-Diablo Valley College of Dentistry
037-Drake University College of Dentistry	343-Duluth Technical College
509-Durham College	344-East Tennessee State University
345-Eastern Washington State College	005-Eastman Dental Dispensary
500-Edison Community College	346-El Paso Community College
347-Emory University	348-Erie Community College
152-Fairleigh Dickinson University	962-Fanshawe College - Ontario
349-Fayetteville Technical Institute	350-Ferris State University
351-Florence-Darlington Tech College	352-Florida Community College

ALPHABETICAL LIST OF DENTAL SCHOOLS AND CODES

353-Foothill College Department of Dental Hygiene	354-Forsyth School for Dental Hygiene
355-Fresno City College	009-Genesee Community College
314-George Brown College - Toronto	038-Georgetown University
337-Georgia Perimeter College	011-Georgian College Canada
356-Grand Rapids Community College	357-Greenville Technical Education Center
358-Guilford Technical Institute	359-Harcum College
360-Harper College	361-Harrisburg Area Community College
137-Harvard School of Dental Medicine	362-Hawkeye Institute of Technology
965-Horry-Georgetown Technical College	363-Hostos Community College
364-Howard County Junior College	042-Howard University
365-Hudson Valley Community College	366-Idaho State University
902-Illinois - Specialty Exam	367-Illinois Central College
368-Indiana River Community College	369-Indiana University - Fort Wayne
370-Indiana University - Northwest Gary	371-Indiana University - NW School of Dentistry
372-Indiana University - South Bend	047-Indiana University School of Dentistry
419-John A. Logan College	315-John Abbott College - Quebec
373-Johnson County Community College	374-Kalamazoo Valley Community College
375-Kellogg Community College	504-Kennedy King College, Chicago IL
075-Kirkwood Community College	007-La Cite Collegiale - Canada
376-Lake Land College - Illinois	517-Lake Superior College - Minnesota
511-Lake Washington Technical College	377-Lakeland Community College - Ohio
378-Lamar University	379-Lane Community College
380-Lanier Technical Institute	381-Lansing Community College
382-Laramie County Community College	960-Lewis and Clark Community College
383-Lexington Technical Institute	149-Loma Linda University
506-Lorain County Community College	172-Louisiana State University
142-Loyola University - Chicago	385-Loyola University - New Orleans
386-Luzerne County Community College	387-Macon Junior College
388-Madison Area Technical School	389-Mankato State College
959-Manor Junior College	063-Marquette University
390-Maysville Community College	065-McGill University
170-Medical College of Georgia	391-Medical College of South Carolina
067-Meharry Medical College	392-Meridian Community College
393-Miami-Dade Community College	394-Middlesex Community College, MA
395-Middlesex County College, NJ	396-Midlands Technical College
397-Midwestern State University	777-Military Site
398-Milwaukee Area Technical College	666-Miscellaneous
399-Missouri Southern State College	400-Monroe Community College
401-Montgomery County Community College	402-Mott Community College
503-Mount Ida College of Dental Hygiene	403-Mt. Hood Community College
404-N.E. Mississippi Junior College	405-New Hampshire Technical Institute
406-New York City College of Technology	084-New York University
316-Niagara College – Ontario	407-Normandale Community College
408-North Central Technical College	409-North Dakota State School of Science
410-Northampton Community College	411-Northeast Louisiana University
412-Northeast Metro Technical College	413-Northeast Mississippi Community College
414-Northeast Wisconsin Tech College	415-Northern Arizona University
416-Northern Kentucky University	417-Northern Virginia Community College
126-Northwest Technical College	081-Northwestern University
963-Nova Southeastern University	418-Oakland Community College
087-Ohio State University	420-Old Dominion University
421-Onondaga Community College	182-Oral Roberts University
422-Orange County Community College	141-Oregon Health Sciences University
423-Oregon Institute of Technology	424-Owens State Community College

ALPHABETICAL LIST OF DENTAL SCHOOLS AND CODES

425-Palm Beach Community College	426-Parkland College
427-Pasadena City College	428-Pasco-Hernando Community College
429-Pearl River Community College	430-Pennsylvania College of Technology
431-Pensacola Community College	432-Phoenix College
433-Pierce College	434-Pima Community College - West
435-Portland Community College	436-Prairie State College
437-Pueblo Community College	438-Quinsigamond Community College
439-Rangely College	384-Rhodes State College
961-Rio Salado Community College	440-Roane State Community College
441-Rochester Community College	076-Rock Valley College
442-Rose State College	443-Sacramento City College
444-Saint Jerome College	966-San Joaquin Valley College
964-Santa Rosa Junior College	445-Sante Fe Community College
317-Seneca College - Ontario	446-Shawnee State University
447-Sheridan College	448-Shoreline Community College
449-Sinclair Community College	450-Southeast Community College
175-Southern Illinois University	451-Springfield Technical Community College
954-St. Clair College of Applied Arts & Technology	452-St. Cloud Technical College
453-St. Louis Community College	103-St. Louis University
454-St. Petersburg Junior College	455-St. Philips College
514-Stark State College of Technology, Canton, OH	161-SUNY - Buffalo
456-SUNY – Farmingdale	176-SUNY - Stony Brook
888-Sylvan Computer – Dental	999-Sylvan Computer - Hygiene
457-Tallahassee Community College	458-Tarrant County Junior College
114-Temple University	459-Tennessee State University
460-Texas Women's University	461-Thomas Jefferson University
462-Trident Technical College SC	151-Tufts University
463-Tulsa Junior College	464-Tunxis Community College
465-Tyler Junior College	466-Union County – College Technical Institute
472-University College of Bangor	147-University of Alabama
467-University of Alaska/Anchorage CC	002-University of Alberta
468-University of Arkansas - School of Dental Hygiene	469-University of Bridgeport - Fones
168-University of British Columbia	159-University of California - Los Angeles
155-University of California - San Francisco	470-University of Cincinnati - R. Walters
174-University of Colorado	164-University of Connecticut
036-University of Detroit - Mercy	171-University of Florida
950-University of Florida Dental School	471-University of Hawaii
045-University of Illinois	050-University of Iowa
160-University of Kentucky	178-University of Laval
058-University of Louisville	158-University of Manitoba
006-University of Maryland	167-University of Medicine and Dentistry of NJ
070-University of Michigan	073-University of Minnesota
473-University of Minnesota - Duluth	181-University of Mississippi
162-University of Missouri - Kansas City	074-University of Montreal
077-University of Nebraska	184-University of Nevada School of Dental Medicine
489-University of New England	953-University of New Haven
474-University of New Mexico	148-University of North Carolina - Chapel Hill
177-University of Oklahoma	166-University of Pennsylvania
098-University of Pittsburgh	154-University of Puerto Rico
475-University of Rhode Island	169-University of Saskatchewan
476-University of South Colorado	477-University of South Dakota
109-University of Southern California	478-University of Southern Indiana
116-University of Tennessee	156-University of Texas -- Houston

ALPHABETICAL LIST OF DENTAL SCHOOLS AND CODES

179-University of Texas -- San Antonio	163-University of the Pacific
119-University of Toronto -- Canada	479-University of Vermont
129-University of Washington	318-University of Western Ontario
480-Valencia Community College	124-Vanderbilt University School of Dentistry
004-Ventura County Community College	125-Virginia Commonwealth University
481-Virginia Western Community College	512-Wallace State College
482-Walters College	130-Washington University
484-Wayne County Community College	952-Wayne Technical Institute
485-Weber State University	486-West Liberty State College
487-West Los Angeles College	488-West Virginia Institute of Technology
150-West Virginia University	490-Western Kentucky University
491-Westmoreland County Community College	492-Wharton County Community College
493-Whytheville Community College	494-Wichita State University
495-Yakima Valley Community College	496-York Technical College
497-Youngstown State University	

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Council of Interstate Testing Agencies, Inc.
1003 High House Road, Suite 101
Cary, North Carolina 27513
(919) 460-7750

DENTAL ASSISTANT UTILIZATION

Candidates are required to notify the CITA office as to their intention in the use of assistants for the patient based portions of the examination. ***The candidate must complete this form and submit it to the CITA office no later than two weeks prior to the examination date.***

Candidate Name: _____

Candidate Number: _____

Examination Site:_____ **Examination Date:**_____

Option One:

I **do not** intend to utilize a dental assistant for any portion of the CITA examination.

Option Two:

I **do** intend to utilize a dental assistant during one or more portions of the CITA examination, which are specified below:

Restorative Examination

Periodontal Examination

I have submitted the following along with this form:

Dental Assisting Form with 2 Assistant Photos

Candidate Signature

Date

I realize that failure to notify CITA of my intent regarding utilization of assistants during the examination will preclude me from engaging an assistant during the examination process.

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DENTAL ASSISTING FORM

Directions: Candidates will be required to submit to the CITA office within two (2) weeks of the examination, this complete form and two (2) passport-size photographs of their assistant(s). All auxiliary personnel will be required to have a CITA issued identification badge and will be required to wear the badge at all times while on the clinic floor. The badge will be provided in the candidate examination packet on the day of the scheduled examination. Failure to timely provide the items listed above to the CITA office will result in the assistant being prohibited from participating in the examination. (Copies of this form may be made as necessary).

Candidate Name: _____

Dental Assistant Name: _____

Address: _____

Telephone: () _____

Dental Assistant Place of Employment: _____

Procedure Assisting With: _____ Restorative _____ Periodontal _____ Both

I, _____, certify that the dental assistant
(Candidate's Name)

listed above is not a licensed or unlicensed dentist/dental hygienist; fourth year dental student; final year dental hygiene student, dental technician, employee of the School where the examination is being administered; or an expanded duty auxiliary (if providing services normally done by a dentist).

Candidate Signature

Date

Council of Interstate Testing Agencies, Inc

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Cary, North Carolina 27513

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INTERPRETER BADGE FORM

Directions: Candidates will be required to submit to the CITA office within two (2) weeks of the examination, this complete form and two (2) passport-size photographs of each of their interpreters. All interpreters will be required to have a CITA issued identification badge and will be required to wear the badge at all times while on the clinic floor. The badge will be provided in the candidate examination packet on the day of the scheduled examination. Failure to timely provide the items listed above to the CITA office will result in the interpreter being prohibited from participating in the examination. (Copies of this form may be made as necessary).

Examination Site and Date: _____

Candidate Name: _____

Interpreter Name: _____

Interpreter's Address: _____

Interpreter's Telephone: () _____

Procedure that the interpreter will be present during:

_____ Restorative _____ Periodontal _____ Both

Candidate's Signature: _____

Date: _____

Facility Fees, Staffing Fees, Instrument Rental Fees

The following fees are charged by the testing facility, with the exception of staffing fees and are collected by CITA on behalf of the testing site. All fees MUST be paid in addition to the application fee and are due upon submission of the application. If applying on-line, fees must be received by CITA within ten (10) business days. All fees must be paid in the form of a cashier check, certified check or money order and are to be made payable to "CITA". **ALL PAYMENTS MAY BE IN THE FORM OF ONE PAYMENT. PERSONAL CHECKS AND CASH PAYMENTS ARE NOT ACCEPTABLE. FAILURE TO SUBMIT PROPER PAYMENT WILL RESULT IN THE CANDIDATE'S APPLICATION BEING INCOMPLETE AND THUS BEING RETURNED. A \$100.00 ADMINISTRATIVE FEE IS CHARGED FOR ALL RETURNED APPLICATIONS.**

All fees listed below are to be paid directly to CITA, with the exception of South Carolina. CITA will send in the confirmation packet, information regarding the testing facility and the instruments provided.

Alabama - \$250.00 (manikin examination, includes facility use)

\$250.00 (patient based examination, includes facility use)

candidates required to bring own sterilized instruments or arrangements may be made with the school for sterilization of instruments

\$175.00 (CITA staffing fee for hired staff for the conduct of the examination. Only applicable for the patient-based examination. ALL APPLICANTS ARE REQUIRED TO PAY THIS FEE IF TAKING THE PATIENT BASED EXAMINATION)

Louisiana - \$150.00 (this fee covers BOTH the manikin and patient based examination and instrument rental. If you are taking the manikin examination or patient based examination or BOTH, the \$150.00 fee is mandatory)

Mississippi - \$250.00 (manikin examination, includes facility use, instrument rental and sterilization)

\$250.00 (patient examination, includes facility use, instrument rental and sterilization)

North Carolina - \$250.00 (manikin examination, includes facility use, instrument rental and sterilization. Current students of record at UNC are not required to pay the facility fee for initial test.)

\$350.00 (patient based examination, includes facility use instrument rental and sterilization. Current students of record at UNC are not required to pay the facility fee for initial test.)

\$175.00 (CITA staffing fee for hired staff for the conduct of the examination. Only applicable for the patient-based examination. ALL APPLICANTS ARE REQUIRED TO PAY THIS FEE IF TAKING THE PATIENT BASED EXAMINATION)

Puerto Rico - \$250.00 (manikin examination, includes facility use)

\$250.00 (patient based examination, includes facility use)
candidates required to bring own sterilized instruments

The following fees are charged by the testing facility and are collected by the institution and are required to be paid directly to the testing site prior to the examination.

South Carolina - \$400.00 (patient examination, includes facility use)

\$350.00 (manikin examination, includes facility use)

\$500.00 (instrument rental and sterilization)

Council of Interstate Testing Agencies Dental Examination Initial Application

Please affix one (1) 2" x 2" passport size photograph here and paperclip another 2" x 2" passport size photograph to the application.

Directions: Please complete the application in its entirety either typed or legibly printed with blue/black ballpoint pen ink. The application must be submitted with two (2) passport size photographs, certification of graduation **OR** a letter from the registrar's office stating degree received and date of graduation **OR** an official transcripts in a school sealed envelope and the appropriate examination fees.

- 1) First Name: _____ Middle Initial: _____
- 2) Last Name: _____
- 3) Maiden Name: _____
- 4) Social Security Number: _____ - _____ - _____
- 5) Mailing Address: (Street/PO Box #): _____

- 6) City: _____
- 7) State: _____ Zip Code: _____
- 8) Contact Phone Number: () _____ Fax Number: () _____
- 9) Email Address: _____
- 10) School of Graduation Code: _____ Date of Graduation (MM/YY): ____/____
- 11) Are you currently enrolled in a post-graduate program? Yes No
(If yes, please indicate name of facility): _____

- Have you previously completed a post-graduate program? Yes No
(If yes, please indicate name of facility): _____

- 12) What state do you plan on practicing in? _____
- 13) Please indicate the Part/Parts of the examination you are applying for:
 Endodontics Prosthodontics Restorative Periodontics

14) Please indicate the testing facility site and session of your first choice: (Every attempt will be made to accommodate your request.)

Test Site

- Alabama Louisiana Mississippi North Carolina Puerto Rico South Carolina

Session

Month: _____ Date(s): _____

15) Please indicate the testing facility site and session of your second choice in the event your first choice cannot be granted. Session must be different than your first choice.

Test Site

- Alabama Louisiana Mississippi North Carolina Puerto Rico South Carolina

Session

Month: _____ Date(s): _____

16) Have you applied for the CITA examination before? Yes No
(If "yes," please indicate the last location and year of examination):

Test Site

- Alabama Louisiana Mississippi North Carolina Puerto Rico South Carolina

Year

- 2005 2006 2007 2008 2009

17) Do you have a latex allergy? Yes No

18) Are you left handed? Yes No

19) Do you have a physical challenge or learning disability which requires a reasonable deviation from the normal administration of the examination? Yes No
(If "yes," please provide required documentation to the CITA office.)

By making application for a CITA examination, I understand the following:

- my scores may be released to my school of graduation if a Confidentiality Agreement has been signed by my School for CITA;
- my scores will be sent to the current member states of CITA once I achieve CITA status or in the event I fail any Part of the CITA examination three successive times;
- I will not be granted CITA Status until I successfully complete all Parts of the CITA examination and the CITA office has received an official copy of my National Board scores from the Joint Commission;
- Oral photographs may be taken randomly during the examination by an authorized photographer retained by CITA. The purpose is to capture a broad representation of actual procedures which can be used for examiner calibration exercises and student remediation. The photographs will include no identification of either the patients or candidates; and
- Before, during and after a CITA examination, I am expected to conduct myself in a manner that is appropriate for a dental licensure candidate. Therefore; if CITA should determine, at its sole discretion, that I have acted in a manner that raises doubts about my fitness for licensure, then I hereby release, discharge and exonerate CITA, its agents and representatives from any and all liability of every nature and kind that might arise out of its furnishing information about such activities to one or more state boards of licensure. Similarly, I hereby release, discharge and exonerate any state board, its agents and representatives from any and all liability of any nature and kind that might arise out of its utilization of such information as might be provided by CITA.

Signature

Date

