Courses are forming NOW!
Wichita Area Technical College’s has a Kansas Dental Board Approved Nitrous Oxide Course. The course is 16 contact hours with a full nitrous oxide-oxygen lab. After completion of the course, students will receive their certification in Administration and Monitoring of Nitrous Oxide-Oxygen Analgesia.
This course is supported by Delta Dental of Kansas Foundation; who award Wichita Area Technical College with grant money to purchase equipment and offer scholarships for the new course. Please contact Rachael Wiebe 316-677-1813 or Cheryl Gallardo 316-677-1311 for more information.

Course Information

Course participants must be:
- Current CRP for Healthcare Providers
- Current Certified Dental Assistant of Dental Assistant National Board, or;
  - Graduate of an ADA CODA accredited dental assistant education program, or;
  - Two (2) years current chairside dental assistant experience.

Registration must be received at least one week prior to course date. Formation of classes depends upon sufficient enrollment. WATC reserves the right to cancel or postpone classes regardless of the advertised starting date.

Cost: $350

* Maximum/Minimum Enrollment: minimum 6 students / maximum 12 students

Class Location: WATC Southside Center, 4501 E. 47th St. S., Wichita, KS, RM# D116/ D117

*Enrollment is on a first-come, first-served basis. Formation of classes depends upon sufficient enrollment. WATC reserves the right to cancel or postpone classes regardless of advertised dates.

2017 Course:
April Course: April 7th and April 7th (8:30am to 3:30pm) with approx. 2 ½ hours of required self-study (15 total hours)
December Course: Dec 1st and Dec 8th (8:30am to 3:30pm) with approx. 2 ½ hours of required self-study (15 total hours)

Course Payment: completed Registration Form and Proof of the above requirements for each applicant:

- Scan and Email to Jeff Thomas at jthomas17@watc.edu. For payment contact Vicki Timmons at 316-677-1941, or
- Mail registration information and payment to: Wichita Area Technical College, Attn: Jeff Thomas, 4501 E 47th S. South, Wichita, KS, 67210
REGISTRATION FORM

FULL NAME
Last First Middle Initial DOB

CURRENT ADDRESS
Street Address
City State Zip

Registration Checklist:
☐ I am registering for spring 2017: April 7th and 14th
☐ I am registering for spring 2017: Dec 1st and Dec 8th
☐ I have completed the free application to Wichita Area Technical College (watc.edu>Admissions>Apply Now)
☐ I have completed registration form.

▪ I have included the following form to verify enrollment qualifications
  ☐ Current CPR card for Healthcare Providers (must be current through completion of the course).
     ▪ Verification of enrollment qualifications, include one of the following:
       ☐ Applicant is a CDA: include a copy of most current CDA certificate issued by the Dental Assistant National Board
       ☐ Applicant is a graduate of a CODA accredited program: request transfer of program transcript to WATC’s registrar or a copy of program diploma. Program must be an accredited through American Dental Association Commission on Dental Accreditation. Not sure if your program was accredited, visit http://www.ada.org/en/coda/find-a-program.
       ☐ Applicant has two years current chairside experience: Letter from employer confirming applicant has obtain a minimum of two years chairside dental assistant experience. Experience must be current and within the last five years.

▪ Course cost (select which one applies)
  ☐ I have included a check for the amount of $350 (make checks payable to WATC).
  ☐ I will call WATC to pay the amount $350 by phone.

☐ I understand before registration is complete and space is reserved, all documentation and fees must be received by the college.

SIGNATURE DATE