



HEALTH LICENSING OFFICE
Board of Denture Technology

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COURSE CONTENT COMPARISON

IMPORTANT: To ensure that you receive credit for courses you have taken you must complete each line of this form, identifying each course title, credits received, educational institution providing credit, and completion date for each of the educational areas listed on this form, and you must submit this completed form with your application.

APPLICANT NAME: LAST FIRST MIDDLE INITIAL

Educational Areas	Credits Required	Title of Course or Comparable Course(s)	Credits Received	Educational Institution Providing Credit	Completion Date(s)
Orofacial Anatomy	2				
Dental Histology and Embryology	2				
Pharmacology	3				
Emergency Care or Medical Emergencies	1				
Oral Pathology	3				
Pathology Emphasizing Periodontology	2				
Dental Materials	5				
Professional Ethics and Jurisprudence	1				
Geriatrics	2				
Microbiology and Infection Control	4				
Clinical Denture Technology	16				
Laboratory Denture Technology	37				
Nutrition	4				
General Anatomy and Physiology	8				
General Education and Electives	13				

Please ensure that all areas of this form are filled in and return this completed form with your application.
 Remember to retain a copy for your records.