

**CERTIFICATION OF CLINICAL PRACTICE**

List all locations at which you practiced to verify the 3,500 hours of licensed clinical practice in the five years **immediately preceding this application** (Dentists OAR 818-021-0011, Dental Hygienists OAR 818-021-0025). Use additional sheets if necessary.

**Location/Address:** \_\_\_\_\_  
 \_\_\_\_\_

Average hours per week \_\_\_\_\_ **years** \_\_\_\_\_ **months**

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_  
 \_\_\_\_\_

Average hours per week \_\_\_\_\_ **years** \_\_\_\_\_ **months**

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_  
 \_\_\_\_\_

Average hours per week \_\_\_\_\_ **years** \_\_\_\_\_ **months**

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_  
 \_\_\_\_\_

Average hours per week \_\_\_\_\_ **years** \_\_\_\_\_ **months**

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_  
 \_\_\_\_\_

Average hours per week \_\_\_\_\_ **years** \_\_\_\_\_ **months**

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

I certify that the above information is true and correct.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---

**Location/Address:** \_\_\_\_\_

Average hours per week \_\_\_\_\_ years \_\_\_\_\_ months

From \_\_\_\_\_ to \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

---