



For Office Use Only

1222-001- \$15.00

STATE OF TENNESSEE
DEPARTMENT OF HEALTH
DIVISION OF HEALTH LICENSURE AND REGULATION
OFFICE OF HEALTH RELATED BOARDS
665 Mainstream Drive
NASHVILLE, TENNESSEE 37243

TENNESSEE BOARD OF DENTISTRY
(615) 532-3202 or 1-800-778-4123

https://www.tn.gov/health/health-program-areas/health-professional-boards/dentistry-board.html

Sealant Certification Application

This application must be completed and submitted to the Board's Administrative Office along with the \$15.00 certification fee. The course provider will send proof of course completion directly to the Board's office. Do NOT complete this form prior to taking the course. Applicants for sealant application may not perform sealant application until notification by the Board that this certification has been added to their registration or the 90 day temporary permit has been issued and received by the dental assistant.

Name: Last First Middle Maiden

Mailing Address:

City State Zip

Is this an address change? Yes No Social Security #

Registration #: Home Phone # Work Phone#

Name of School or Course Provider Date Taken

- Part of an ADA accredited dental assistant program (no temporary permit required)
A Tennessee Board approved certification course (temporary permit required for externship)
A Tennessee Board approved dental assistant program (temporary permit required for externship)
An out of state course (The curriculum, including the number of hours in sealant instruction and the number and type of sealants required to be completed in the course and/or during an externship)

Name of Course and Date Completed:

Name and License Number of Supervising Dentist(s) for 90 day temporary permit:

Signature of Applicant

Date