



Ohio State Dental Board
 77 S. High Street, 17th Floor
 Columbus, Ohio 43215-6135

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 (614) 752-8995 Fax
 Dental.Ohio.Gov

DENTAL HYGIENE CONTINUING EDUCATION LOG

I certify to the board that in the two-year period preceding the registration period for this renewal I completed a minimum of twenty-four hours of continuing dental hygiene education in compliance with R.C. 4715.25 and O.A.C. 4515-8 and I shall retain records and documentation for a period of at least four years (including receipts, vouchers, or certificates) as may be necessary to document completion of continuing education programs. The board may request such records and documentation with cause or at random without cause.

Printed Name:

License #:

Signature:

Date:

Name of Sponsor		Date of Course	# CE Hours
Course Title/Subject			

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