



**CUSTOM DENTAL ASSISTING SCHOOL**

**COURSE CATALOG**

*"Voted #1 Dental Assisting School in Oklahoma!"  
est. 2012*

**GUTHRIE LOCATION**  
2001 S Division St  
Guthrie, OK 73044

**YUKON LOCATION**  
4425 Grant Blvd  
Yukon, OK 73099

**PURCELL LOCATION**  
700 Chandler Rd  
Purcell, OK 73080

**(405) 245-2576**

okassistingschool@gmail.com

*EFFECTIVE July 1, 2024*



State of Oklahoma  
**Oklahoma Board of  
Private Vocational Schools**



**LEARN MORE**

Application, Course  
Dates, FAQ's...



# TABLE OF CONTENTS

## **3**

### **CONTACT HOURS**

Hours of Operation  
Holiday Schedule

## **4**

### **HISTORY**

Philosophy  
Mission

## **5**

### **SCHOOL ADMINISTRATION/OWNER**

Detail listing of Books, Tools & Major  
supplies etc.  
Admission Requirements

## **6**

### **SCHOOL POLICIES**

## **7**

### **PROBATION & DISMISSAL**

## **8**

### **STUDENT GRIEVANCE PROCEDURE**

## **9**

### **GRADING SCALE**

Course Objective  
Course Description

## **10**

### **COURSE DESCRIPTION**

## **11**

### **COURSE DESCRIPTION**

Course Externship

## **12**

### **COURSE OUTLINE**

## **13**

### **REFUND POLICY**

Records

## **14**

### **ENROLLMENT CONTRACT**

## **15**

### **TUITION**

## **16**

### **EMERGENCY CONTACT FORM**



### **CONTACT HOURS**

Monday-Saturday 8 a.m. – 7 p.m.  
(Hours that CDAS can be contacted)

### **DENTAL PRACTICE HOURS OF OPERATION**

Monday-Thursday  
8 a.m.-6 p.m.

(Full dental practice hours in which the student will complete their weekly, 4 hr on-the-job training)

### **SCHOOL HOURS OF OPERATION**

Friday or Saturday 8 a.m. - 5 p.m.  
(During offered course dates, when lecture and lab will take place)

### **HOLIDAY SCHEDULE**

Classes will not be held on the following holidays:

Memorial Day  
Independence Day  
Labor Day  
Thanksgiving Day

### **Classes are held on the following days:**

- Fridays or Saturdays 8 a.m.- 5 p.m. during Course Dates specified on application.
- Lectures will take place in the Dr.'s office.
- Students also required to complete 4hrs of on-the-job training at a Custom Dental location OR an approved Dental office of their choosing every week until the course has concluded. Students will be graded on appearance, attitude, attendance, and performance. Students will indicate their 4hr, on-the-job training shift details during class each week via a sign-up sheet to best accommodate schedules.

*\*Note: On-the-job training hours are not the same as and **do not count** towards the 40-hour externship.*

- One day during the course for Radiology Certification. Date and location for certification will be determined by each student due to the certification being offered by the Oklahoma Dental Foundation, NOT Custom Dental Assisting School. More information about Radiology Certification can be found at [www.okdf.org](http://www.okdf.org).

*\*Note: Transportation will not be provided for Radiology Certification or on-the-job training.*



## **HISTORY**

Custom Dental Assisting School was established in 2012 by Dr. Nathan Brown. Dr. Brown is the CEO of Custom Dental, a series of 17 dental offices in multiple states, which began over 40 years ago. He practices general dentistry with emphasis in Crown and Bridge, Removable Prosthetics, Oral Surgery, Endodontics, Periodontology, Implants and Orthodontics.

Dr. Brown, as an author, mentor, and dental speaker, felt that after expanding Custom Dental to 10 offices, in just 3 years, growing at 63,000 new patients a year, their system is worth opening up a school and giving opportunities to share the unique education Custom Dental's Assistants have experienced.

## **PHILOSOPHY**

Custom Dental Assisting School proudly presents a 10-week dental assisting program providing and focusing on "hands-on" training with a practicing dentist along with classroom and lab education. We are dedicated to providing real life experiences in the dental field to give our students the best possible training on procedures and techniques to jump start their passion and career in dentistry. We are driven by the understanding that our success is dependent upon the success of our students.

## **MISSION**

Our mission is to equip and prepare students to achieve a professional status as competent dental assistants who have graduated with the skills and credentials required performing and working towards a career and passion to help others through dentistry.



## **LIST OF SCHOOL ADMINISTRATION AND FACULTY**

### **SCHOOL ADMINISTRATION**

Dr. Nathan Brown, D.D.S .....Director of Education and Owner  
Mandi Danker .....Course Director, Instructor and Owner  
Jessica Bond .....Admissions President, Instructor and Asst. Course Director  
Tonya Fry .....Lead Instructor

### **BOOKS, TOOLS AND MAJOR SUPPLIES**

Our enrollment contract states that our tuition for our students includes:

- All necessary educational materials
- All necessary dental materials
- Dental Assisting Permit in the State of Oklahoma
- CPR Certification (must pass CPR test)
- OSHA Training
- Radiation Certification Test (must pass Radiology test provided by the Oklahoma Dental Foundation)
- Letter of Recommendation (must attain a 70% or greater)

### **ADMISSION REQUIREMENTS**

1. Graduation from an approved High School Program
2. Successful completion of a GED (Certification of Equivalency).
3. Must possess a desire to learn and an attitude encouraging success.
4. Must be able to communicate effectively, using proper English and Grammar.
5. Applicants must submit your completed application packet to the dental assisting program with down payment on or before the course deadline for consideration to the program.
6. Must present themselves professionally in behavior and appearance.
7. Custom Dental Assisting School does not give any credit for prior training or work experience.

\*Requirement #'s 1 & 2 are NOT requirements BUT are strongly encouraged.



## **SCHOOL POLICIES**

- A 70% GPA is required for certificate. Failure to maintain grade point average will result in student being placed on probation.
- Student must maintain an 80% attendance record. Failure to maintain attendance will result in student being placed on probation.
  - Attendance is calculated by the number of days a student attends class and on-the-job training out of the total possible days of class and on-the-job training.
- Absences, tardiness, or leave cannot be made up.

*ONLY EXCUSABLE ABSENCES\*\*\*-Previous week's quiz or test can be made up in addition to the following week's quiz or test and will be due promptly at 8:30am.*
- Student will be responsible for signing up for an open on-the-job training shift for that week.
- 2 Tardies (arriving more than 5 min late) equal 1 absence.
- Conduct of each student must be cordial. Students must be respectful to instructor and each other by not talking to one another, use of phone, or any other distractions during class. Failure to comply will result in student being asked to leave the class and accept an absence for the day.
- Professional behavior and appearance are expected from students at all times especially when training in clinical areas.
- Uniform/Scrubs will be worn to class and on-the-job training shifts.
- Exceptions to policies and rules must be approved in advance by the Course Director.
- When a student is placed on probation, they will receive a Written Probation Notice stating the violation and outlining the terms and conditions of their probationary period.
  - *\*The purpose of this notice is to address any concerns that have arisen due to the violation and give the student an opportunity to rectify the situation.*
  - Refer to our “Probation & Dismissal” section for terms and conditions



## **PROBATION & DISMISSAL**

When a student is placed on probation, they will be presented with a written Probation Notice and Warning of Dismissal with the following:

### **TERMS AND CONDITIONS OF PROBATION:**

1. **Acknowledgement of Violation:** You understand and acknowledge that you have violated Custom Dental Assisting School's School Policy, as stated above. By signing this probation letter, you confirm your understanding of the nature of the violation and accept responsibility for your actions.

2. **Compliance:** You must strictly adhere to all rules, policies, and regulations outlined in the Custom Dental Assisting School Course Catalog, as well as any additional conditions imposed by the disciplinary committee.

3. **Academic Performance:** You are required to maintain satisfactory academic progress during the probationary period. You should actively engage in your studies, clinicals, on-the-job trainings and seek assistance when needed.

Failure to do so may result in further disciplinary action or the possibility of failing the course. It is important to note that a minimum GPA of 70% is necessary to obtain a Custom Dental Assisting School Certificate of Completion.

4. **Punctuality:** It is imperative that you are punctual to every on-the-job training shift and day of class for the remainder of this semester. Subsequent violation will result in immediate dismissal from Custom Dental Assisting School.

5. **Good Conduct:** It is expected that you maintain a positive and respectful attitude towards fellow students, faculty, and staff members at all times.

Failure to meet any of the above conditions or any additional conditions specified by the disciplinary committee may result in further disciplinary action, including but not limited to dismissal from the Custom Dental Assisting School.

During this time, a student is expected to demonstrate a significant improvement in their behavior, conduct, and adherence to the School Policies set forth by Custom Dental Assisting School.

This probation period is intended to address the concerns raised by the violation and to provide you with an opportunity to rectify the situation.

We strongly encourage students placed on probation to take the probationary period as an opportunity for personal growth, self-reflection, and positive change. We believe in our student's ability to learn from their experience and make better choices moving forward.



## **STUDENT GRIEVANCE PROCEDURE**

Should a student have a complaint with Custom Dental Assisting School, then the following steps shall be taken by him/her.

1. Student shall first attempt to address the grievance informally with the instructor or applicable staff member and try to resolve it. If unsuccessful, proceed to the written grievance procedure.
2. Students may state the grievance in writing to Mandi Danker, or designee. Please submit the written request within 60 days of the occurrence to Mandi Danker at [mdanker@customdentalusa.com](mailto:mdanker@customdentalusa.com), and she will assist you in resolving your concerns. She will investigate the grievance within 5 business days of receiving the complaint by contacting the student via email or phone to set up a meeting. In the meeting, Mrs. Danker will discuss the complaint, allow the student to be heard, and discuss an amicable resolution to the complaint. Written notification via email of the resolution will be sent to the student within 10 days after the student meeting.
3. In her absence you can contact, Jessica Bond at [jbond@customdentalusa.com](mailto:jbond@customdentalusa.com). She will contact the student within 5 business days of receiving the complaint via email or phone to set up a meeting. In the meeting Jessica will discuss the complaint, allow the student to be heard, and discuss an amicable resolution to the complaint. She will consult with the Director and written notification via email of the resolution will be sent to the student within 10 days after the student meeting.
4. Should The Director or designee fail to or give unacceptable address the grievance, the Student may file a complaint with the OBPVS. The complaint shall be in writing and shall contain at least the following information:
  - a. The name, address and telephone number of the person making the complaint;
  - b. The name and address of the school;
  - c. The course enrolled and starting date of class;
  - d. A brief, clear description of the complaint(s) including detailed information regarding names of instructors, school personnel, type of equipment, class involved, or the specific part of catalog or enrollment agreement which may be involved in the complaint;
5. Documents supporting the complaint, such as copies of the contract and enrollment agreement, receipts of payments made, letters or other correspondence relating to the complaint, or copies of electronic communications;
6. The remedy, if any, that the person is seeking;
7. A statement authorizing the release of whatever information may be necessary to investigate the complaint;
8. The signature of the person making the complaint and the date of the complaint.

**Mail to:**

**OBPVS**

3700 N. Classen Blvd., Ste. 250 Oklahoma City, OK 73118

(405) 528-3370)





## **GRADING SCALE**

**A** 100-90%

**B** 89-80%

**C** 79-70% Passing

**D** 69-60% **Not** Passing

**F** 59- 0%

## **COURSE OBJECTIVE**

Upon completion of this course, the student will be equipped and prepared to achieve a professional status as a competent dental assistant who has graduated with the skills and credentials required performing and working towards a career and passion to help others through dentistry. The following subjects are covered in depth from both an academic and a practical clinical experience. The morning lecture is followed by an afternoon of clinical, "hands-on" training in our state-of- the-art practicing dental office. During their course of study, the students learn the operation of all equipment, instrumentation and materials commonly used in a general dental practice. All students will be trained in OSHA and receive opportunities to be certified in CPR and Radiology (one of four expanded duties that are offered to dental assistants by the Oklahoma State Board of Dentistry). As for the other 3 expanded duties (Nitrous Oxide Application, Coronal Polishing, and Placing Sealants) our students will have most of the prerequisites to accomplish those duties and have been educationally trained in these by completing this course of study. Below is our Course Description. The Course Outline will offer a detailed outline of the student's extensive clinical training received here at Custom Dental Assisting School.

## **COURSE DESCRIPTION**

### **Students will perform the following essential skills:**

1. **ON-THE-JOB TRAINING** starting the very first week of class.
2. Dental Procedure set-ups, breakdown of operatory room and sterilization.
3. Dental Charting, patient care & dental software navigation.
4. Upper and lower alginate impressions, model pouring and trimming.
5. Fabricating upper and lower bleaching trays.
6. HVE Suctioning
7. Fabricating temporary crowns from start to finish. Including experience with fast & slow set impression material & proper tray placement.
8. Instruction on Coronal Polishing, Topical Fluoride, placing Sealants on teeth & Monitoring patient Nitrous Oxide administration.
9. Full Dental Equipment Operation
10. X-ray technique & experience with full FMX (18 films) + Panoramic x-rays.
11. Instrument passing to doctor (4-handed dentistry)
12. The vitality of each student's Character, Competence and Consistency within the Dental Office.



## **COURSE DESCRIPTION**

**All students will receive training in the following areas:**

### **1. Dental Terminology and the Dental Assistant Profession**

- a. Preferred traits, qualities, and duties of a Dental Assistant
- b. Brief overview of medicine and health questionnaire
- c. Dental and oral anatomy, tooth identification and numbering system on models as well as live patients
- d. Dental terminology
- e. Equipment operation, chair positioning, assistant equipment usage

### **2. Radiology, Charting, Dentrix**

- a. Brief navigation of Dentrix (or current dental software)
- b. Seating the patient, new patient experience
- c. X-ray theory and technique, digital x-rays and other methods
- d. Intraoral, bitewing, periapical, and panoramic exposure methods
- e. X-ray identification, interpretation, safety and precautions
- f. Oral exam and dental charting

### **3. Oral Surgery and Implantology**

- a. Familiarity and use of instruments, materials and procedures in assisting for Oral Surgery:
- b. Topical anesthetic placement
- c. Local anesthetic types and properties
- d. Preparing tx room, anesthetic syringe, patient
- e. Instruction on monitoring patient nitrous oxide administration and calculating nitrous percentages.
- f. Oral Surgery - instruments, procedures and post-op protocols
- g. Implants - one piece, two piece, and o-ball

### **4. Four Handed Dentistry, Restorative, and Endodontics**

- a. Instrument transfer techniques, chair-side assisting and patient HVE suctioning techniques
- b. Chair-side doctor-patient-assistant positioning
- c. Familiarity and use of Instrument transfer techniques, materials, chair-side assisting and patient HVE suctioning techniques for restorative and other procedures
  1. Burs-uses and properties as well as Toffelmeir/Matrix band placement
- d. Amalgam/Composite fillings: processes
- e. Inlays, Onlays, and Endodontics - instruments, medicaments and materials: how and why they are used

### **5. OSHA Training and CPR Certification**

- a. Handpiece care and maintenance
- b. Instrument and equipment sterilization / disinfection
- c. Treatment room disinfection
- d. OSHA (Occupational Safety & Health Act) Training
- e. CPR (Cardiopulmonary Resuscitation) Certification

### **6. Fixed and Removable Prosthodontics**

- a. Types of Crowns & Bridges
- b. Core Materials & their uses
- c. Polyvinyl "gun type" impression taking



- d. Temporary acrylic crown fabrication
- e. Types of permanent and temporary cement used in dentistry
- f. Practice mixing cements and liners
- g. Types of Oral Prosthetics: Dentures, Partials, Flippers etc.
  - 1. Reline materials and uses
  - 2. Denture stabilization

### **7. Introduction to Periodontics**

- a. Intro to Periodontics
  - 1. Stages of periodontal disease
  - 2. Perio Charting
- b. Introduction to Coronal Polishing
- c. Introduction to placing Sealants
- d. Alginate Impressions and practice in their uses
- e. Model pouring and trimming
- f. Fabrication and delivery of bleaching trays
- g. Dental Specialties Overview: Oral Surgery, Orthodontist, Pedodontist, Periodontist, Prosthodontist

### **8. Orthodontics and Resume**

- a. Straight wire Orthodontics
- b. Invisalign
- c. Orthodontic numbering, instruments, and terminology
- d. Changing elastics
- e. Resume Instruction

### **9. Job Interview, Final Dental Education and Clinical Testing**

- a. Job interview preparation and Resume
  - 1. Difficult questions you may face during an interview - how to answer them.
  - 2. Do's and don'ts during the interview, what to expect.
- d. Timed operatory procedure setups
- e. Final dental education and patient care testing

## **COURSE EXTERNSHIP**

Custom Dental Assisting School (CDAS) does NOT arrange the Externship, however, will provide assistance if needed.

The Externship will be evaluated, within the guidelines of a CDAS score sheet, by the dental office where student chooses. The Externship may begin to take place after Midterms, but is strongly encouraged not to begin until after the course is over to have a more expanded knowledge of dental assisting. There is ONE MONTH DEADLINE from the end of the course to have the 40 hr Externship COMPLETED. The Externship score sheets will need to be completed and sent by email to the student's lead instructor once completed. The Dental Assisting Completion Certificate will be awarded on the last day of the course (if student achieves a 70% or greater), on the other hand, the Letter of Recommendation will NOT be awarded until the Externship is completed. CDAS is NOT responsible for transportation to the Externship location.



**COURSE OUTLINE**

SUBJECT/PHASE	CREDIT HOURS				
	LECTURE	CLINICAL-HANDS-ON DENTAL TRAINING	EXTERNSHIP	TOTAL	
Intro to Dental Assisting/Terminology	4	4		8	
Radiology/Charting	4	6		10	
Oral Surgery/Implantology	4	6		10	
4handed dent/Restorative/Endodontics	4	6		10	
OSHA training/CPR certification	4	4		8	
Fixed and Removable Prosthetics	4	4		8	
Intro to Periodontics	4	4		8	
Orthodontics/Resume	4	4		8	
Job Interview/Procedure Setups	4	6		10	
On-the-Job Training-Dental Assisitng		40		40	
Externship			40	40	
	TOTALS	36	84	40	160



## **REFUND POLICY**

A graduation certificate and letter of recommendation will be only awarded to those students attaining a 70% or above grade average. Those students whose grade average is below 70% will not receive a certificate but will be allowed to retake the entire course at a reduced fee of \$1500.

An applicant rejected by the school shall be entitled to a refund of all monies paid minus any stated application fee. All monies paid by student will be refunded if requested within three days after signing enrollment agreement and making an initial payment. For a student requesting a refund after three days of enrollment but prior to entering school and starting the course of training, all monies will be refunded except for a \$200 enrollment fee. For a student terminating training after entering school and starting the course of training, but within the first week, the tuition will be refunded minus \$350 plus any outside certification fees. After the first week but within week 3 of the course, 75% of the tuition will be refunded minus the \$200 enrollment fee plus any outside certification fees. Between weeks 3-5, 50% of the tuition will be refunded minus the \$200 enrollment fee plus any outside certification fees. No refunds will be given if terminating the course after week 5 has been completed. In case of student prolonged illness or accident, death in the family, or other circumstances that make it impractical to complete the course, the school shall make a settlement which is reasonable and fair to both. If a class is discontinued by a school while students are still enrolled in that class, and the school is still offering training in other areas, all monies (student loan, grant, and etc.) paid the school for students enrolled in the class at the time it is discontinued will be refunded to the entity legally entitled to the refund.

This policy applies to students who drop out or who are dismissed.

## **RECORDS**

Copies of certificates and enrollment agreement will be kept on permanent file at the school office address:

### **Custom Dental Assisting School, LLC**

*Corporate Office*

**330950 E 875 Rd**

**Wellston, Oklahoma 74881**

**(405) 245-2576**



## **STUDENT ENROLLMENT CONTRACT**

*\*Effective July 1, 2024*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip \_\_\_\_\_ DOB \_\_\_\_\_

Course & Location \_\_\_\_\_ Total Tuition Cost \$ \_\_\_\_\_

*(ex. Fall Yukon 2024)*

This enrollment contract between \_\_\_\_\_ and Custom Dental Assisting School reflects legal written agreement between each party. The student will receive instruction in the course, Dental Assisting. Specific class title is listed in the course outline and school catalog. A Dental Assisting Certificate of Completion will be awarded at the end of the course upon completion of the course totaling 160 hours. The student is responsible for the total tuition price stated above including a \$1,500.00 down payment prior to the first day of class and the remaining balance due by the last day of the course. The tuition fee includes all educational materials, all dental materials, Dental Assisting Permit, CPR Certification, OSHA Training, Radiology Certification Test, and Letter of Recommendation with an approximate cost of \$200.00. \*The CPR and Radiology Certifications are achieved only if the student passes their certification tests, and a Letter of Recommendation is only awarded to those students attaining a 70% or greater in the course and complete their 40-hour externship. The student is also responsible for the \$10.00 Radiation cost for personal license upon passing Radiation Certification Test. Although employment counsel is given, post-school employment is the sole responsibility of the graduate.

A graduation certificate and letter of recommendation will be only awarded to those students attaining a 70% or above grade average and complete their 40-hour externship. Those students whose grade average is below 70% will not receive a certificate but will be allowed to retake the entire course at a reduced fee of \$1500.

An applicant rejected by the school shall be entitled to a refund of all monies paid minus any stated application fee. This policy applies to students who drop out or who are dismissed on the enrollment agreement. All monies paid by student will be refunded if requested within three days after signing enrollment agreement and making an initial payment. For a student requesting a refund after three days of enrollment but prior to entering school and starting the course of training, all monies will be refunded except for a \$200 enrollment fee. For a student terminating training after entering school and starting the course of training, but within the first week, the tuition will be refunded minus \$350 plus any outside certification fees. After the first week but within week 3 of the course, 75% of the tuition will be refunded minus the \$200 enrollment fee plus any outside certification fees. Between weeks 3-5, 50% of the tuition will be refunded minus the \$200 enrollment fee plus any outside certification fees. No refunds will be given if terminating the course after week 5 has been completed. In case of student prolonged illness or accident, death in the family, or other circumstances that make it impractical to complete the course, the school shall make a settlement which is reasonable and fair to both. If a class is discontinued by a school while students are still enrolled in that class, and the school is still offering training in other areas, all monies (student loan, grant, and etc.) paid the school for students enrolled in the class at the time it is discontinued will be refunded to the entity legally entitled to the refund.

**ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES WHICH THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS OR SERVICES OBTAINED PURSUANT HERETO OR WITH THE PROCEEDS HEREOF, RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER.**

By signing this contract, student acknowledges that he or she had read understands and accepts all the provisions of this enrollment contract and that he or she has received an executed copy.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Official Signature

\_\_\_\_\_  
Date



Custom Dental Assisting School (CDAS) is designed is to equip and prepare students to achieve a professional status as competent dental assistants who have graduated with the skills and credentials required performing and working towards a career and passion to help others through dentistry.

**DENTAL ASSISTING**

**Daytime School**

Length in Months 2.5  
Number of Weeks 10.0  
Contact Hours 160.0

Tuition Cost .....	\$	4,297.00
Items provided/prepaid for student: All educational and dental materials, CPR Certification, OSHA Training, Radiology Certification Test, Dental Assisting Certificate of Completion, Letter of Recommendation. ....	\$	<i>Included in tuition</i>
Enrollment Fee.....	\$	<u>200.00</u>
<b>TOTAL COST .....</b>	<b>\$</b>	<b>4,497.00</b>

**The Class Schedule is as Follows**  
**Fridays or Saturdays of Course Dates**  
**8 a.m. - 5 p.m.**  
**On-the-Job Training**  
**4 hrs every week during Course**

This Catalog is certified to be true and correct

*Nathan Brown*

*5-27-24*

Date

Dr. Nathan Brown, Owner and Administrative Official

*\*Effective date of Catalog – July 1, 2024*

**Custom Dental Assisting School, LLC**

330950 E 875 Rd  
Wellston, Ok 74881  
(405) 245-2576



**CUSTOM DENTAL ASSISTING SCHOOL**

**EMERGENCY CONTACT FORM**

**STUDENT NAME:** \_\_\_\_\_

Course Location, Semester & Year: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_



**CONTACT ONE**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**CONTACT TWO**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**CONTACT THREE**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Relationship \_\_\_\_\_