Arizona Expanded Functions Program Approval Application

This form will be accepted through Dec. 31, 2025.

Contact DANB with any questions at 1-800-367-3262 or email docreview@danb.org.

Mail to: DANB
Attn: Document Review
444 N. Michigan Ave., Suite 900
Chicago, IL 60611

Email to: docreview@danb.org
Please allow 2-3 weeks for processing.

Requirements

The expanded function dental assistant training program must be offered at an institution with an educational program accredited by the Commission on Dental Accreditation (CODA) and must provide instruction in all five of the Arizona expanded functions (listed below).

Program Information

Must be filled out completely or application will be returned as incomplete.

School Name _____

School Address _____ City _____ State _____ Zip _____

CODA-Accredited Program(s) at this school (select all that apply):

☐ Dental Assisting
☐ Dental Hygiene
☐ Dental
☐ Other (please specify): _____

Program Director Name _____

Program Director Email _____

Program Director Phone Number(s): Office (_____) _____ Cell (_____) _____

Program Attestation

Must be signed and dated or the application will be returned as incomplete.

By signing this form, I attest that this expanded functions program covers content in all five of the Arizona expanded functions (listed here):

1. Place, contour and finish direct restorations
2. Place and cement prefabricated crowns following the preparation of a tooth by a licensed dentist
3. Place interim therapeutic restorations
4. Apply sealants
5. Apply fluoride varnish

Program Director Signature X _____ Date X _____

Instructor Information

Provide the names and contact information of any instructors who will or may be teaching within the program.

Name	Credentials	Phone	Email

By submitting this form, you are consenting to receive email and mailings from DANB and its official affiliates related to DANB policies, news and related products or services affecting the dental assisting profession. DANB will not share your information with any other third party without your consent. You can request removal from DANB's email list by clicking on the "unsubscribe" link at the bottom of DANB emails.