We are honored that you chose to participate in this important program. In order to assure the highest possible integrity for the program and to insure optimal patient safety, participants/instructors are required to complete and return the following forms before the beginning of the course.

For a patient treatment course, all participants who will be involved in actual patient treatment must supply certain documentation prior to start of course:

1. This form (also known as the Participant Form) signed
3. The Hipaa certificate and Signed Confidentiality Statement
4. A copy of your current hygiene license
5. A copy of your current CPR license

ALL participants/instructors must complete two other required items that pertain to HIPAA before the course. We have included 3 web links below and a description of what they are.

HIPAA and Confidentiality Statement Links

HIPAA instructions and exam– Click on the links
http://privacy.health.ufl.edu/training/visitors/instructions.shtml

Explanation of the Confidentiality Statement & Health Information Policy:
http://privacy.health.ufl.edu/confidential/index.shtml

The Confidentiality Statement itself:
http://privacy.health.ufl.edu/confidential/confid_stmt.asp

I understand and acknowledge that my participation in an University of Florida College of Dentistry continuing education program is as a private hygienist and not as an employee or agent of the University of Florida College of Dentistry.

Participant’s Signature __________________________ Date ____________

Director’s Signature __________________________ Date ____________

Please print off the Confidentiality Statement and the HIPAA Certificate of Completion, sign the Confidentiality Statement and fax these items, along with this form signed, a copy of your hygiene license and CPR card to UF Continuing Dental Education at 352-294-5594

You will not be allowed to start the course until all materials are furnished.

The Foundation for The Gator Nation
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