



OHIO STATE DENTAL BOARD

Dental Hygienist Continuing Education Log – Renewal Upload

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 (24) hours of continuing dental hygiene education** in compliance with [R.C. 4715.25](#) and [O.A.C. 4715-8](#) and I shall retain records and documentation for a period of at least four (4) 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. Additional CE information can be found here: <https://www.dental.ohio.gov/Education-Renewal/Continuing-Education>

Printed Name

License #:

Signature:

Date:

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

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Course Title/Subject			

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