

DENTIST/EMPLOYER/INSTRUCTOR CONTRACT AGREEMENT

AGREEMENT

THIS AGREEMENT is made between dentassiss, hereafter referred to as "PROGRAM" and _____, hereafter referred to as "DENTIST/EMPLOYER". If the DENTIST/EMPLOYER authorizes a licensed dental employee who meets our requirements to instruct the student, the licensed dental employee must agree and sign the Terms of Agreement set herein. The assigned Instructor/temporary faculty or dentist/employer is _____, hereafter referred to as "INSTRUCTOR". The dental assistant for training hereafter will be referred to as "STUDENT".

The extramural clinical facility or the dental practice where instruction will be given is located at _____.

WHEREAS, dentassiss is providing a Pathway to Dental Assisting program for a Dental Board of California approved course in the Dental Practice Act (two hours) and Infection Control (eight hours).

WHEREAS, the DENTIST/EMPLOYER and/or INSTRUCTOR agree to instruct a dental assisting in the didactic, laboratory, preclinical and clinical instruction portion of the program.

TERMS OF AGREEMENT

This Agreement shall commence on the date hereof. DENTIST/EMPLOYER and/or INSTRUCTOR agree to perform instruction for the PROGRAM within sixty (60) days of signed Agreement.

The INSTRUCTOR shall remain as Faculty of the Program for the duration of the four hour length of the laboratory, preclinical and clinical instruction after meeting PROGRAM requirements.

DENTIST/EMPLOYER agrees to provide supervision of the PROGRAM. INSTRUCTOR agrees that laboratory, preclinical and clinical instruction shall be performed under the direct supervision of INSTRUCTOR or DENTIST/EMPLOYER.

INSTRUCTOR agrees to have an active license with the Dental Board of California and to have completed the Dental Practice Act and Infection Control courses and hold a current CPR certification mandated by the board for license renewal.

INSTRUCTOR agrees to have completed a California OSHA Bloodborne Pathogens Review within the last year and follow Cal-DOSH guidelines.

INSTRUCTOR shall complete a two (2) hour Teaching Methodology in Clinical Evaluation course prior to conducting clinical evaluations of students. You must take a test and receive a passing grade of seventy percent (70%) or higher.

INSTRUCTOR agrees to follow our PROGRAM guidelines completing all preclinical and clinical competency-based instruction/teaching and evaluations, making sure students complete written examinations and supervise STUDENTS in instruction.

INSTRUCTOR and DENTIST/EMPLOYER agree to have the "Minimum Requirement for Equipment and Armamentaria" in their clinical setting/practice. The "Minimum Requirement for Equipment and Armamentaria" checklist is to be reviewed, signed, dated and returned with this Agreement.

The INSTRUCTOR agrees to have STUDENT complete the Dental Practice Act course and exam and the didactic portion, Phase I of the Infection Control course and exam prior to the four (4) hour preclinical and clinical instruction.

INSTRUCTOR agrees to read and sign the Written Policy on Managing an Emergency Situation.

PAYMENT

The DENTIST/EMPLOYER agrees to pay the PROGRAM the sum of three hundred and sixty five (\$365.00) dollars per STUDENT.

Payment is due at the time the Terms of Agreement are signed.

The Program needs to be completed within one hundred twenty (120) days from date of signed agreement.

There are no refunds on the PROGRAM.

Certificate of Completion for the two hours Dental Practice Act and eight hour Infection Control course will be issued within two weeks of completing and passing the Program.

CONFIDENTIALITY

INSTRUCTOR and DENTIST/EMPLOYER recognize and acknowledge that the PROGRAM possesses certain confidential information that constitutes a valuable, special, and unique asset. INSTRUCTOR and DENTIST/EMPLOYER agrees that all of the confidential information is and shall continue to be the exclusive property of the PROGRAM, whether or not prepared in whole or in part by the PROGRAM. INSTRUCTOR and DENTIST/EMPLOYER agrees that the PROGRAM shall not, at any time following the execution of this Agreement, sue or disclose in any manner any confidential information of the PROGRAM.

IDEMNITY

INSTRUCTOR and DENTIST/EMPLOYER agrees to indemnify, defend, and hold the PROGRAM and its successors, officers, directors, agents and employees harmless from any and all actions, causes of action, claims, demands, cost, liabilities, expenses and damages arising out of, or in connection with any breach of the Agreement by INSTRUCTOR and/or DENTIST/EMPLOYER.

ARBITRATION AGREEMENT

The parties agree to arbitrate any dispute arising from this agreement and expressly waive their respective rights to bring suit in court for claims of law or equity for the enforcement of this agreement. The arbitration shall be conducted according to the rules and procedures established by the California Arbitration Act. The parties agree that the venue for any arbitration shall be Sacramento, California, unless otherwise agreed in writing by the parties. In the event litigation arises surrounding the Terms of Agreement, the prevailing party shall be entitled to costs, reasonable attorney's fees and other necessary and proper expenditures in addition to whatever other relief may be awarded. This term applies only to the parties to this agreement and does not extend to any non-signatories of this agreement.

dentassist
Pathway to Dental Assisting Program
815 30th Street
Sacramento, California 95816
916 443-1113 phone
916 443-1135 fax
ce@dentassist.com
Program Director – Lisa Saiia