



MANITOBA DENTAL ASSISTANTS ASSOCIATION
2011 WAGE & BENEFIT SURVEY

- 1. Year of graduation
2. Do you work part time? Full-time? Job share?
3. Are employed in a city practice or a rural practice
4. Years with present employer General Practice Specialty Practice Other
5. Modules: Year obtained
6. Present Salary: per hour per month yearly
7. Vacation Time: number of weeks/year number of days/year
8. Sick Time: days per year
9. Do you have Long Term disability? Yes No If yes, paid for by self employer
10. Extra Benefits: dental plan chiropractic/massage therapy/physiotherapy eye glass coverage prescription coverage others please list: