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**MEDICAL AND DENTAL PROFESSIONS BOARD**

**FORM 176-DPv.X4**

**HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA  
MEDICAL AND DENTAL PROFESSIONS BOARD**

**GUIDELINES FOR REGISTRATION OF FOREIGN QUALIFIED DENTAL  
PRACTITIONERS AND DENTAL SPECIALISTS**

These guidelines are developed in compliance with the

**HEALTH PROFESSIONS ACT 56 OF 1974**

and

**REGULATIONS RELATING TO THE REGISTRATION OF PERSONS WHO HOLD  
QUALIFICATIONS NOT PRESCRIBED FOR REGISTRATION**

Published under Government Notice R101 in Government Gazette 31859 of 6 February 2009

and

**REGULATIONS RELATING TO THE SPECIALTIES AND SUBSPECIALTIES IN MEDICINE AND  
DENTISTRY**

Published under Government Notice R590 in Government Gazette 22420 of 29 June 2001

and amended by: GN R1457 GG 27099 13/12/2004 GN R712 GG 30165 17/8/2007 GN R645 GG  
35612 22/8/2012

**1. DENTAL PRACTITIONERS**

These guidelines are intended to assist an applicant who wishes to apply for registration with the Medical and Dental Professions Board.

The following documents must be submitted to the Board at the address provided below:

- The application Form 12 duly completed.
- Copy of degree certificate or other basic qualification in dentistry and a sworn translation in English (Copies will only be accepted if certified by an attorney in his/her capacity as a notary public and bearing the official stamp. Copies certified only by a Commissioner of Oaths will not be accepted). Only original translations of the required documents done by a sworn translator and duly sealed and notarised will be accepted. In addition to such English translations, legible copies of the original documents,

certified and duly sealed by a Notary Public should be submitted. Alternatively original documents together with copies could be submitted for verification by the relevant Council staff. In view of possible damage or loss of such documents it is not advisable to send such documents by mail.

- Sufficient details of the degree / programme course for assessment as to its equivalence with local programmes in terms of the exit level competencies; experiential work carried out (quota per discipline); and time spent on didactic teaching and learning, laboratory instruction, and clinical training. The appropriate form which is part of this document must be completed and endorsed by the institution issuing the degree.
- If applicable, proof of internship training or equivalent training/experience, or post-graduate training issued by the relevant institution.
- A letter from the Foreign Work Force directorate of the SA National Department of Health, permitting application to be considered for registration with the HPCSA. *Please note that this is only permission for you to apply for registration and does not guarantee you or entitle you to a post within the public health sector, if you are subsequently successfully registered with the HPCSA.*
- Proof of registration as a Dental Practitioner by the regulatory body in the country of origin.
- A recent original certification of status (certificate of good standing) issued by the foreign authority where the applicant is currently registered, within the preceding six months.
- A certified copy of a valid Passport or Identity Document as proof of current citizenship.
- Dental Practitioners are currently required to have all the academic qualifications evaluated in order to determine their *level* in relation to recognised qualifications. A request for an evaluation should be submitted to the South African Qualifications Authority at the following address:

SAQA (Evaluation of Qualifications) Postnet Suite 248  
 Private Bag X 06 Waterkloof  
 0145  
 Republic of South Africa Tel: (012) 431 5000  
 E-mail address: saqainfo@saqa.co.za

Such a request must be sent directly to the South African Qualifications Authority and be accompanied by:

- (a) Certified copies of all degree/diploma certificates or similar academic qualifications;
- (b) Official transcripts of records in respect of each qualification referred to in (a) above;
- (c) The prescribed evaluation fee payable to the South African Qualifications Authority.

- A verification report of the applicant's degree and institution from any independent organisation currently recognised for that purpose by the Council must be obtained at the applicant's own expense.

Duly compiled applications or written enquiries may be sent to:

The Registrar  
HPCSA  
P O Box 205  
PRETORIA 0001

### **1.1. All foreign qualified dentists are required to meet the following requirements**

- 1.1.1. Proficiency in English is mandatory to communicate with patients and to be enabled to partake meaningfully in the Board's Examination for competence. Candidates from English speaking countries and candidates with English as a first language qualification on secondary school level qualify in terms of this standard. Candidates who do not qualify are requested to obtain the graded academic competence in terms of the International English Language Test System (IELTS) and must achieve Level 7 in each of the modules (listening, academic reading, academic writing, speaking). An alternative would be the Occupational English Test (OET) at grade B. The candidate's academic written and verbal skills relating to academic language are also informally assessed during the Board's examination when applicable.
- 1.1.2. Candidates who hold a qualification from an institution / registration body which is deemed not to be equivalent to a South African dental degree to such an extent that the experiential procedures required of that degree fall far short of those required of a South African dental degree will not be admitted to the Board examination for competence and will be advised to enrol if possible in a South African dental school in order to obtain a South African dental degree or other school which will provide a more compatible degree.
- 1.1.3. Candidates who hold a qualification from an institution / registration body which is deemed not to be equivalent to a South African dental degree but in which sufficient experiential procedures have been carried out, are required to enrol for and pass the Board's Examination for competence. This is managed by the Board in collaboration with the Universities according to the prescription of the Board's Rules and Regulations.
- 1.1.4. Under certain circumstances, candidates may be exempted from a part or parts of the Board examination.
- 1.1.5. Candidates holding a qualification from an institution / registration body which is deemed to be equivalent to a South African dental degree may apply for exemption from the Board examination for competence and if granted, will serve a minimum of 12 months in supervised practice in an accredited dental training institution in order to become familiar with the clinical profile of patients in South Africa and to show competence in all areas of general dental practice.

1.1.6. Candidates holding a qualification from an institution / registration body which is deemed to be equivalent to a South African dental degree and are granted exemption from the Board examination for competence but who have not been in clinical practice for ten or more years, will have to write the Board examination.

**1.2. Board Examination for competence.** This is for foreign-qualified practitioners and practitioners required to take this examination for restoration of their name to the register.

The Board's dental examination is organised into three parts, theoretical and practical. The examination will be conducted on the Board's behalf by one of the South African dental schools. Unless otherwise stated, the examination will take place once a year, the time to be determined by the Board in collaboration with the dental school assisting the Board.

### **Part I**

This comprises MCQs in bioethics to test the candidate's knowledge of the ethical guidelines of the HPCSA.

Candidates must pass Part I to be eligible for Part II

### **Part II**

This comprises two written papers and will assess the integrated knowledge of all domains of clinical dentistry, including the theoretical and biological aspects which are considered vital knowledge for the general dentist to practice safely without hazard to the patient. Papers may comprise any combination of different types of assessment such as multiple-choice questions, extended matching questions, short answer responses to complex case presentation, radiographic diagnosis and any other forms of assessments the Board may determine.

Candidates must pass Part II to be eligible for Part III.

**Exemption:** exemption from Part II will be granted if the candidate has passed equivalent examinations set in other countries for foreign-qualified practitioners. Examples are the UK Overseas Registration Examination (UK); the National Board Dental Examination (USA); the Written Examination of the Australian Dental Council. Candidates may apply to the Board for the recognition of other similar examinations.

### **Part III**

This will comprise practical examinations testing the following clinical skills in a skills laboratory on simulated models.

**Endodontics:** Procedures to be carried out on an extracted bicuspid tooth are access cavity, canal preparation and obturation. Candidates will be supplied with appropriate instrumentation which will include an air turbine, speed-increasing handpiece, hand and rotary instrumentation and obturation materials.

**Operative dentistry:** A two-surface composite restoration on a posterior typodont tooth. Candidates will be supplied with a speed-increasing handpiece, an appropriate matrix system and restorative materials.

**Maxillo-Facial and Oral Surgery:** (a) to demonstrate the administration of an inferior alveolar nerve block local anaesthetic; (b) to demonstrate the placement of forceps for the extraction of all teeth; (c) to demonstrate / explain the surgical extraction of roots and third molars.

**Prosthodontics:** (a) to survey a cast of a partially edentulous case and to draw suitable designs for an acrylic- and metal-based removable partial denture; (b) to carry out a preparation for a ceramo-metal crown on a posterior typodont tooth; (c) to carry out a preparation for an all-ceramic crown on an anterior typodont tooth and to fabricate a provisional crown for that tooth. Candidates will be supplied with the following:

For part (a): a surveyor and a template for the design;

For part (b): a speed-increasing handpiece, with appropriate burs

For part (c): a speed-increasing handpiece, with appropriate burs; a straight handpiece with appropriate burs for the provisional; a thermo-formed coping of the unprepared teeth; a polyethyl methacrylate for the provisional crown with suitable instrumentation; access to a laboratory for completion of the provisional crown.

Candidates may bring their own instruments and burs and are highly advised to use magnification in the form of appropriate loupes.

A pass for *each* of the above assessments is required in order for the candidate to pass Part III.

**Exemption:** exemption from Part III will be granted if the candidate has passed equivalent examinations set in other countries for foreign-qualified practitioners. Examples are the Part 2 of the Overseas Registration Examination (UK); the National Board Dental Examination (USA); the Practical Examination of the Australian Dental Council. Candidates may apply to the Board for the recognition of other similar examinations.

A maximum of three (3) attempts may be made to pass each Part of this examination. A fourth attempt may be considered at the discretion of the Board one year after the unsuccessful third attempt. The applicant is expected to undergo further training during this period. It is the responsibility of the applicant to obtain such training and provide proof thereof.

Once the Board examination has been passed, the candidate will be registered in the category of Supervised Practice in an accredited dental training institution for a minimum of 12 months in order to become familiar with the clinical profile of patients in South Africa and to show competence in all areas of general dental practice.

**1.3 After having served 12 months in the category of Supervised Practice (see section 1.5 below), applicants must provide the following documentation to the appropriate committee of the Board:**

- A log book of dental procedures performed and signed by his/her supervisor,
- A quarterly performance report signed by the by the supervisor and head of the facility.
- Conformance to the CPD Requirements of the HPCSA

The appropriate committee of the Board may then request further information and / or may require further supervised practice for 12 months. Should the applicant be still considered not to have reached the required level of competence, their name will be removed from the Register and they will be advised to enrol if possible at one of the dental schools in order to acquire a South African dental degree or other school which will provide a more compatible degree.

**1.4 In order to obtain registration in the category Independent Practice persons who are not South African Citizens and are registered in the Public Service category are required to:**

- 1.4.1 Have been registered and worked in the Public Service practising the profession for a minimum period of 5 years.
- 1.4.2 Supply the Board with Proof of having obtained permanent residence or South African citizenship in terms of the Immigration Act
- 1.4.3 Have conformed to the CPD Requirements of the HPCSA

**1.5 Unremunerated Supervised Practice Requirements in an accredited dental training institution (which has the required infrastructure)**

- Supervision:
  - The Head of the dental school will delegate supervision to appropriate staff who are in good standing and have been registered for at least three (3) years
  - The university may charge a registration fee for providing the supervision
  - The Head of the dental school must agree in writing to arrange for the supervision of the applicant and take responsibility for all patients treated by the applicant. This requires completion of Form 9DP
  - must comply with any other requirements as determined by the Board
- Log book:
  - the disciplines, procedures and treatments required to be performed over the 12-month period of supervised practice will be those expected of a general dental practitioner in South Africa.
  - the log book (Form 9A-DP) must be signed and dated by both the applicant and the delegated supervisor
  - must comply with any other requirements as determined by the Board
- Reports:
  - Quarterly reports (Forms 9A-DP and 9B-DP) must be submitted to the sub-committee for Education, Training and Registration (Dental) of the Board, signed by the delegated Supervisor and the Head of the dental school
  - must comply with any other requirements as determined by the Board
- CPD Requirements:

- a. The practitioner must show compliance with the CPD requirements of Council during the period of supervised practice.

## 2. DENTAL SPECIALISTS

These guidelines are intended to assist an applicant who wishes to apply for registration with the Medical and Dental Professions Board as a dental specialist.

The following documents must be submitted to the Board at the address provided below:

- The application Form 12 duly completed.
- Copy of degree certificate or other basic qualification in dentistry as well as a copy of the specialist degree qualification or equivalent and sworn translations in English (copies will only be accepted if certified by an attorney in his/her capacity as a notary public and bearing the official stamp. Copies certified only by a Commissioner of Oaths will not be accepted). Only original translations of the required documents done by a sworn translator and duly sealed and notarised will be accepted. In addition to such English translations, legible copies of the original documents, certified and duly sealed by a Notary Public should be submitted. Alternatively, original documents together with copies could be submitted for verification by the relevant Council staff. In view of possible damage or loss of such documents it is not advisable to send such documents by mail.
- Sufficient details of the specialist degree / programme course for assessment as to its equivalence with local programmes in terms of the exit level competencies; experiential work carried out; and time spent on didactic teaching and learning, laboratory instruction, and clinical training, endorsed and completed by the issuing institution. These details will be assessed by peer review of the four Heads of Department of the speciality concerned, of the four South African dental schools.
- Proof of post-graduate work done, including a portfolio of cases.
- A letter from the Foreign Work Force directorate of the SA National Department of Health, permitting application for registration with the HPCSA. *Please note that this is permission only, to apply for registration and does not guarantee a post within the public health sector, if you are subsequently successfully registered with the HPCSA.*
- Proof of registration as a Dental Specialist (if recognised) by the regulatory body in the country of origin.
- A recent original certification of status (certificate of good standing) issued by the foreign authority where the applicant is currently registered, within the preceding six months.
- A certified copy of a valid Passport or Identity Document as proof of current citizenship.
- Dental Practitioners are currently required to have all the academic qualifications evaluated in order to determine their *level* in relation to recognised qualifications. A

request for an evaluation should be submitted to the South African Qualifications Authority at the following address:

SAQA (Evaluation of Qualifications) Postnet Suite 248  
 Private Bag X 06 Waterkloof  
 0145  
 Republic of South Africa Tel: (012) 431 5000  
 E-mail address: saqainfo@saqa.co.za

Such a request must be sent directly to the South African Qualifications Authority and be accompanied by:

- (d) Certified copies of all degree/diploma certificates or similar academic qualifications;
- (e) Official transcripts of records in respect of each qualification referred to in (a) above;
- (f) The prescribed evaluation fee payable to the South African Qualifications Authority.

Duly compiled applications or written enquiries may be sent to:

The Registrar  
 HPCSA  
 P O Box 205  
 PRETORIA 0001

- A verification report of the applicant's degree and institution from any independent organisation currently recognised for that purpose by the Council must be obtained at the applicant's own expense.

## **2.1 All foreign qualified dental specialists are required to meet the following requirements**

2.1.1 Proficiency in English is mandatory to communicate with patients and to be enabled to partake meaningfully in the Board's Specialist Examination for competence. Candidates from English speaking countries and candidates with English as a first language qualification on secondary school level qualify in terms of this standard. Candidates who do not qualify are requested to obtain the graded academic competence in terms of the International English Language Test System (IELTS) and must achieve Level 7 in each of the modules (listening, academic reading, academic writing, speaking). An alternative would be the Occupational English Test (OET) at grade B. The candidate's academic written and verbal skills relating to academic language are also informally assessed during the Board's examination when applicable.

2.1.2 Successful completion of an Ethics examination managed by the Board. This is the Part I of the Board examination for competence for dental practitioners.



- 2.1.3 Candidates who hold a qualification from an institution / registration body which is deemed not to be equivalent to a South African dental degree are required to enrol for and pass the Board's Specialist Examination for competence. This is managed by the Board in collaboration with the relevant College of the Colleges of Medicine of South Africa.
- 2.1.4 Candidates holding a qualification from an institution / registration body which is deemed to be equivalent to a South African dental specialist degree may apply for exemption from the Board specialist examination and if granted, will serve a minimum of 12 months in supervised practice in an accredited dental training institution in order to become familiar with the clinical profile of patients in South Africa and to show competence in all areas of the applicable specialist practice.
- 2.1.5 Candidates holding a qualification from an institution / registration body which is deemed to be equivalent to a South African specialist dental degree and are granted exemption from the Board specialist examination for competence but who have not been in clinical practice for ten or more years, will have to take the examination.
- 2.2 **Board Specialist Examination for competence.** This is for foreign-qualified specialists and specialists required to take this examination for restoration of their name to the register.

The Board's specialist examination comprises the National Professional Examination for that speciality.

Once the Board specialist examination has been passed, the candidate will be registered in the category of Supervised Specialist Practice in an accredited dental training institution for a minimum of 12 months in order to become familiar with the clinical profile of patients in South Africa and to show competence in all areas of their specialty.

**2.3 After having served 12 months in the category of Supervised Specialist Practice (see section 2.5 below), applicants must provide the following documentation to the appropriate committee of the Board:**

- A portfolio displaying the comprehensive management of a broad spectrum of patients, signed by his/her supervisor.
- A quarterly performance report signed by the by the supervisor and head of the facility.
- Conformance to the CPD Requirements of the HPCSA

The appropriate committee of the Board may then request further information and / or may require further supervised practice for 12 months. Should the applicant be still considered not to have reached the required level of competence, their name will be removed from the Register and they will be advised to enrol at one of the dental schools in order to acquire a South African specialist degree.

**2.4 In order to obtain registration in the category Independent Practice (Dental Specialist) persons who are not South African Citizens and are registered in the Public Service category are required to:**

- 2.4.1 Have been registered and worked in the Public Service practising the specialty for a minimum period of 5 years.
- 2.4.2 Supply the Board with Proof of having obtained permanent residence or South African citizenship in terms of the Immigration Act
- 2.4.3 Have conformed to the CPD Requirements of the HPCSA

**2.5 Unremunerated Supervised Specialist Practice Requirements in an accredited dental training institution (which has the required infrastructure)**

- 2.5.1 Supervision:
  - a. The Head of the dental school will delegate supervision to appropriate staff who must be specialists in good standing and have been registered for at least three years
  - b. The university may charge a registration fee for providing the supervision
  - c. The Head of the dental school must agree in writing to arrange for the supervision of the applicant and take responsibility for all patients treated by the applicant. This requires completion of Form 9DPS
  - d. must comply with any other requirements as determined by the Board
- 2.5.2 Log book:
  - a. the procedures and treatments required to be performed over the 12 months of supervised practice will cover all aspects of the scope of practice of that specialty
  - b. the log book (Form 9A-DPS) must be signed and dated by both the applicant and the supervisor
  - c. must comply with any other requirements as determined by the Board
- 2.5.3 Reports:
  - a. Quarterly reports (Forms 9A-DPS and 9B-DP) must be submitted to the relevant sub-committee of the Board, signed by the Supervisor and the Head of the dental school
  - b. must comply with any other requirements as determined by the Board
- 2.5.4 CPD Requirements:
  - a. The specialist must show compliance with the CPD requirements of Council during the period of supervised practice.

## **THE EVALUATION OF FOREIGN NON-SPECIALIST DENTAL DEGREES FOR EQUIVALENCE WITH SOUTH AFRICAN DENTAL DEGREES**

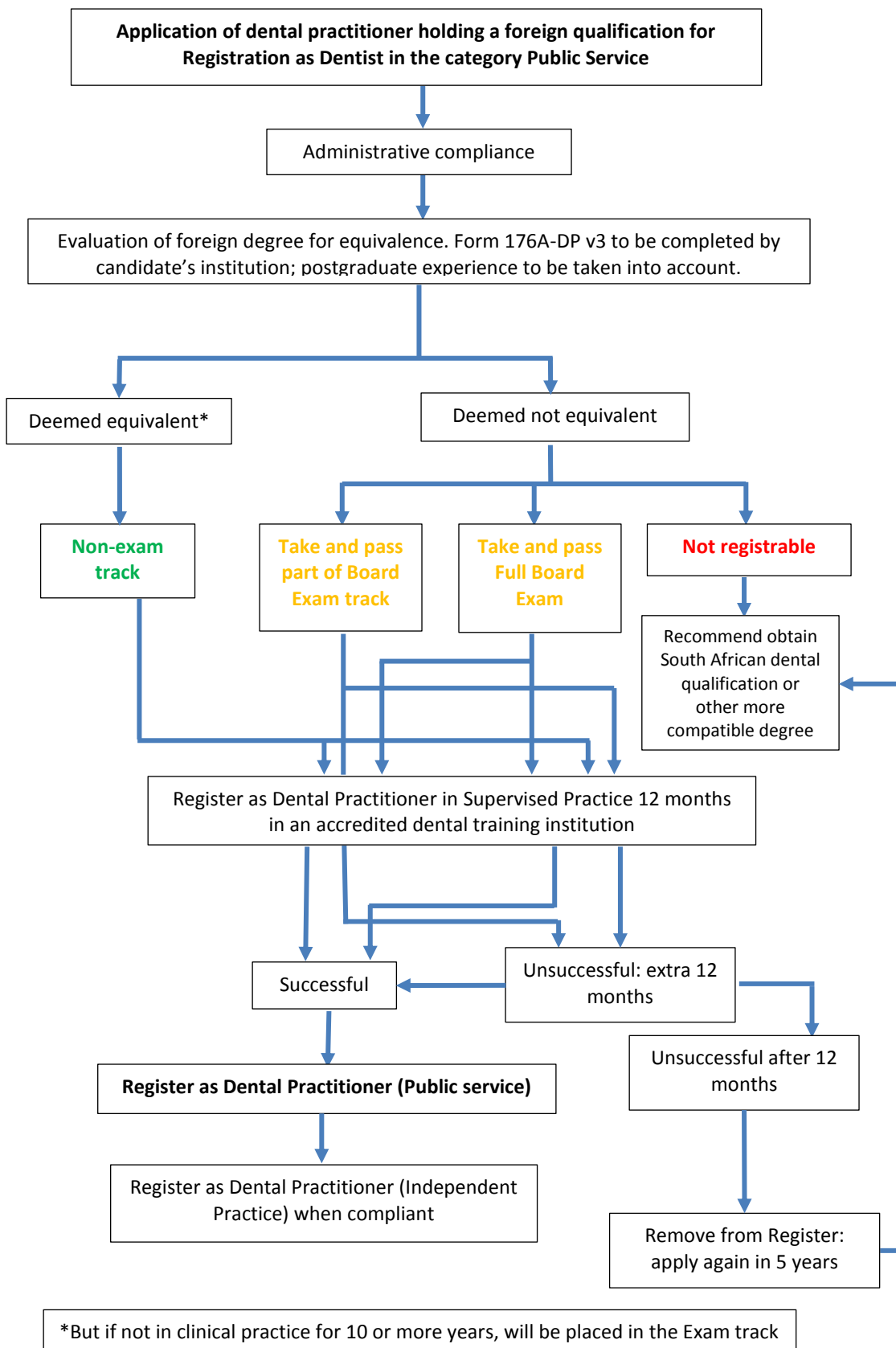
**Form 176A-DP v3 is to be completed electronically by the Institution issuing the applicant's degree. It is NOT to be completed by the applicant.**

After complying with the administrative requirements of the application, Form 176A-DPv3 will be sent to the applicant's institution, and when returned, will be evaluated by the relevant committee of the Board.

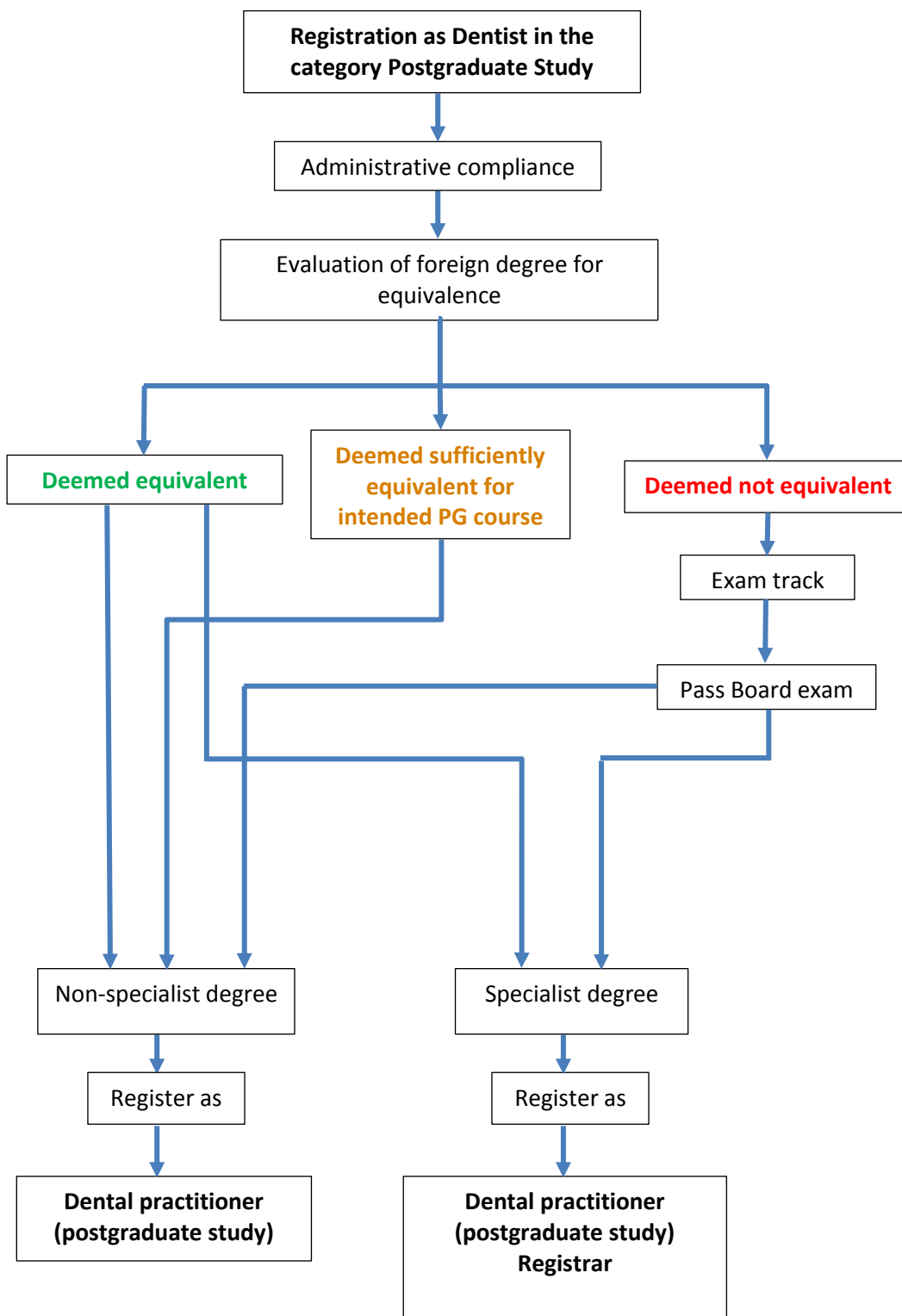
**The form is to be completed by detailing the *actual* clinical procedures carried out by the applicant as an undergraduate. Supporting evidence of signed log books should preferably be supplied.**

**FLOW CHARTS FOR FOREIGN QUALIFIED DENTISTS OR SPECIALISTS WISHING TO REGISTER WITH THE HPCSA.**

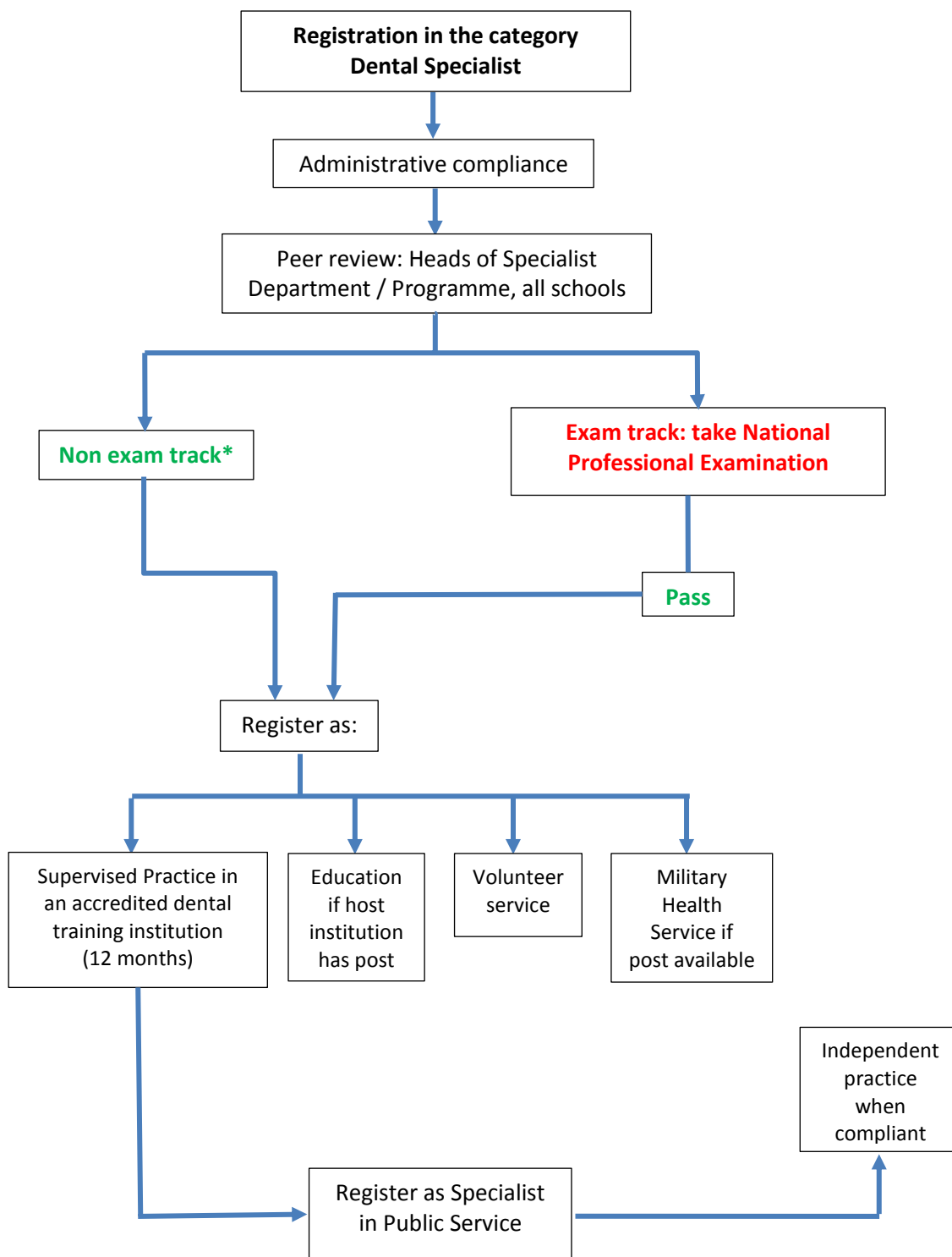
**1. Registration as Dentist in the category Public Service**



2. Registration as Dentist in the category Postgraduate Study



3. Registration in the category Dental Specialist



\*But if not in clinical practice for 10 or more years, will be placed in the Exam track

## FORM 12-DP

**NB: NON-COMPLIANT APPLICATIONS WILL BE REJECTED****APPLICATION FOR REGISTRATION****FOR FOREIGN QUALIFIED DENTAL PRACTITIONER / SPECIALIST**

CATEGORY wishing to register in: SUPERVISED PRACTICE  PUBLIC SERVICE   
 POST GRADUATE  VOLUNTEER SERVICE  EDUCATION  SPECIALIST   
 SPECIALISTS SHOULD ALSO SUBMIT FORM 21 AND FORM 19

1. Title (Prof, Dr): ..... Surname: .....
2. Maiden Name (if applicable): .....
3. First name(s): .....
4. Date of birth: ..... Birth Place: .....
5. Postal address: .....
- Tel. (Work): ..... (Home): .....
- Cell: ..... Fax: .....
- E-mail Address: .....

\*Marital Status:  Divorced  Married  Single  Other \*Gender:  Male  Female  Other

\*Race (Pop. Group)  African  Asian  "Coloured"  White  Other \*Country of origin: .....  
 \*Citizenship: .....

\* For statistical purposes only – Information required by the National Department of Health. By "race" is meant the population groups as defined by the apartheid regime.

DOCUMENTS REQUIRED PER CATEGORY OF REGISTRATION, MARKED WITH AN X UNDER THE APPLICABLE CATEGORY	PUBLIC SERVICE	POST GRAD	VOLUNTEER	EDUCATION	SPECIALIST
Notarised Undergraduate Degree	X	X	X	X	X
Notarised copy of Transcript of dental qualification	X		X	X	X
Notarised Identity Document / Passport	X	X	X	X	X
Notarised copy of specialist qualification					X
Detailed academic curriculum of specialist training					X
Evidence specified period which the applicant had spent at the training/teaching hospital					X
Evidence that the hospital is a teaching hospital					x
Original Certificate of Status (Affidavit in case of re-registration)	X	X	X	X	X
Deans supporting letter		X		X	
FWMP endorsement letter	X	X		X	X
Health Care Provider letter			X		
Notarised copy of Identity Document	X	X	X	X	X
Notarised copy of Colleges exam					X
Original Certificate of Status from University	X	X	X	X	X

DOCUMENTS REQUIRED PER CATEGORY OF REGISTRATION, MARKED WITH AN X UNDER THE APPLICABLE CATEGORY	PUBLIC SERVICE	POST GRAD	VOLUNTEER	EDUCATION	SPECIALIST
Original Proof of Internship Training (if applicable)	X		X		X
Registration Fees Paid	X	X	X	X	X
SAQA evaluation	X	X	X	X	X
Degree and Institution verification (if available)	X	X	X	X	X
IELTS Certificate (Level 7 in each band) or OET (Grade B)	X	X	X	X	X
Valid Job Offer – NDOH / Health facility			X	X	X
Detailed and up to date Curriculum Vitae outlining professional engagement.	X	X	X	X	X

**Qualifications:**

Name of Degree	University or Institution where degree/qualification was obtained	From		To	
		Month	Year	Month	Year

**Professional Experience (in chronological order)**

Name of Institution	Nature of appointment held	From		To	
		Month	Year	Month	Year

**DECLARATION BY APPLICANT APPLYING FOR REGISTRATION IN TERMS OF THE HEALTH PROFESSIONS ACT, 1974**

I,.....hereby  
 declare under oath as follows:

- a. I am the person referred to in the accompanying certificate(s) of qualification(s) which I submit in support of my application to be registered as a Dental Practitioner in the Republic of South Africa.



b. The said qualification(s) was/were granted to me after examination and is/are my own lawful property, and entitle me as far as professional qualifications are concerned, to practise as a Dental Practitioner in the country of its/their origin, namely –

.....

c. The course of study in professional subjects which I underwent, covered a period of ..... academic years. The last ..... academic years of professional study for admission to the examination for the qualification(s) in respect of which I apply for registration, were taken at

.....

(Insert name of University or Dental School).

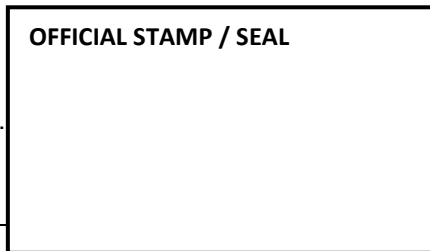
d. I have never been convicted in any country of any offence against the law or been debarred from practice by reason of misconduct and, to the best of my knowledge and belief, no proceedings involving or likely to involve a charge of any such nature are pending against me in any country at present\*.

e. I further accept that my application may be delayed should I fail to submit all the required documentation.

**Signature** .....

SWORN before me at .....

this .....day of ..... 201.....



**Signature:** .....

**Justice of the Peace or Commissioner of Oaths**

I, the undersigned\*\* .....  
of ..... hereby declare under  
oath:

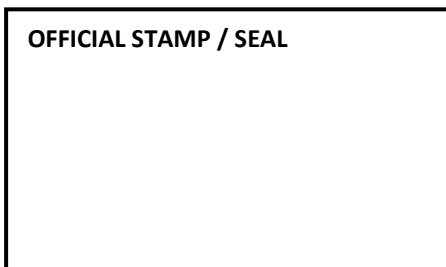
To the best of my knowledge and belief, the statements in his/her declaration are true.

I consider him/her to be a fit and proper person to be registered as a Dental Practitioner.

**Signature:** ..... Profession or calling .....

SWORN before me at ..... this

.....day of ..... 201.....



**Signature:** .....

**Justice of the Peace or Commissioner of Oaths**

District of.....

I, the undersigned\*\* .....  
of ..... hereby declare under  
oath:

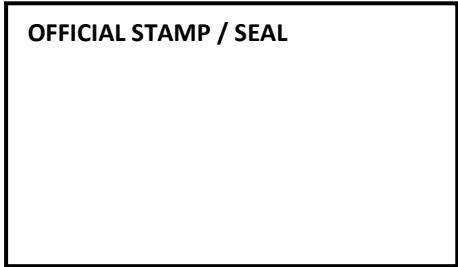
To the best of my knowledge and belief, the statements in his/her declaration are true.

I consider him/her to be a fit and proper person to be registered as a Dental Practitioner.

**Signature:** ..... Profession or calling .....

SWORN before me at ..... this

.....day of ..... 201.....



**Signature:** .....

Justice of the Peace or Commissioner of Oaths

District of.....

\* *If the applicant is unable to make the declaration above, the Council, in order to consider the application, will require full particulars of the reasons for his or her inability.*

\*\* *The signatories should preferably be Dental Practitioners.*

**Any other relevant facts which the applicant wishes to bring to the attention of the Board and attached the relevant documents.**

**COMMENT:**

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