USER GUIDE

Supporting documents for registration applications

Individual assessment

Important information

- When you apply for registration, you need to provide documents to support your application. Most documents can be uploaded electronically, but you may need to send originals or certified copies of some documents to our office by post or courier.
- Please note, we may not require all the documents listed in this guide – some documents will not apply to your application. Required documentation will depend on your qualifications, training and experience and will be marked with an asterisk (*) in your application form.
- You will need to provide evidence of your identity using the Council verification of identity form. Your identity will need to be verified by an authorised witness and the completed form will need to be uploaded to your application and sent as a hard copy to the Dental Council office.
- Certificates of standing/licensure verifications need to be emailed or posted directly to us from the issuing authority and must not be older than 3 months at the point you provide a complete application for assessment.
- Referees need to email their references directly to our office.
- If any of your documents are not in English, you will need to provide an English translation. The translation you give us must be prepared by an official translation agency.
- Please don't submit an application until you have prepared all of the documentation required to support your application.

Submitting hardcopies of your documents

After you submit and pay for your online application, we will contact you to let you know if we need further information from you. We will also tell you if you need to send hardcopies of any documents to us by post or courier.

Please do not submit your hardcopy documents until we ask you to do so.

You can send hardcopy documents by courier or post to the following address:

If sending by courier:	If sending by post:
The Dental Council Level 7, 22 The Terrace Wellington 6011 NEW ZEALAND	The Dental Council PO Box 10-448 Wellington 6140 NEW ZEALAND

Please ensure you use the correct mailing address for the type of postal service you are using. Documents sent to the incorrect address will be returned to you automatically by the postal/courier company.

Please include your full name when sending your documents to us. This will help us match your documents to your application.

If you have any questions, please contact us.

Identification – please note, all identification must be certified by the same authorised witness using this form

Document	Uploaded online	Certified by an authorised witness	Physical document required
Passport sized photograph *Full colour (not black and white), and less than three months old.*	✓	✓	✓
The identification pages of your passport, including the page which contains your signature *Alternatively, you may provide a copy of your New Zealand Driver's License, including the side containing the expiration date.*	✓	✓	✓
Completed verification of identity form *This will need to be posted or couriered to the Dental Council office once your application has been submitted and accepted for assessment.*	✓	✓	✓
Documentation which shows the changes to your name *Such as your marriage certificate, deed poll documentation, name change certificate.*	✓	✓	✓

Qualification

Document	Uploaded online	Shared via Learner/ Receiver portal	Certified by an authorised witness[1]	Physical document required[1]
Course information relating to the qualification upon which you are basing your application[2] *This must include the full curriculum and syllabus, details of the minimum duration of training, details on the nature and volume of clinical training undertaken (e.g. timetables, clinical logbooks where available), where the training took place, and details of the modes of assessment. Specialist programmes also need entry criteria. These must be current at the time of you being awarded the qualification.*	✓			
Qualifications issued via my eQuals, myCreds/MesCertif, Parchment platforms				
The qualification certificate/s upon which you are basing your application	✓	✓		
Your internship completion certificate, where applicable	✓	✓		
Your academic transcript/statement of results for the qualification upon which you are basing your application	✓	✓		
Qualifications not issued via my eQuals, myCreds/MesCertif, Parchment platforms				
The qualification certificate/s upon which you are basing your application	✓		✓	✓
Your internship completion certificate, where applicable	✓		✓	✓
Your academic transcript/statement of results for the qualification upon which you are basing your application	✓		✓	✓

[1] In lieu of posting a certified document, we can receive your qualification and transcript directly from your education institution via email

[2] The Dental Council may ask the training institution to verify the content of the documents provided.

Health information

Document	Uploaded online	Certified by an authorised witness	Physical document required
Laboratory Report *Hepatitis B surface antigen, Hepatitis B surface antibodies, Hepatitis C antibody, and HIV antigen and antibody. The Council's Blood borne viruses practice standard can be accessed here.*	✓		

Fitness to practise

Document	Uploaded online	Certified by an authorised witness	Physical document required
Medical Report relating to mental or physical conditions affecting your fitness to practice *This should include details of illness, duration of treatment, name and contact details of treating practitioner, involvement of teaching institution/employer.*	✓		
Information regarding investigations by an employer, a registration or professional body or educational institution *Such as the reason for the investigation, action taken, and whether all requirements were met.*	✓		
Information regarding any conditions which have been placed on your registration *Such as the reason for the conditions being placed, and whether all requirements were met to have the conditions removed.*	✓		
Information regarding any criminal convictions *Such as a police record, summary of facts, sentencing notes.*	✓		
Information regarding competence enquiries *Such as the reason for the enquiries, action taken, and whether all requirements were met.*	✓		

Practice experience

Document	Uploaded online	Certified by an authorised witness	Physical document required
Curriculum Vitae *This should contain your work experience in chronological order since graduation, including your current employment*	✓		
If your qualification(s) submitted for individual assessment were obtained longer than 12 months ago:			
Cases examples of treatment you have started in the last 3 years —referring to the case requirements document detailed here *Cases should contain (while protecting the privacy of the patient) the reason for the visit, history of present complaint, medical history, dental history, patient expectation, full extra and intra oral examination and charting, special test reports, problem list/diagnosis, treatment plan and treatment provided and follow up details. It should be supplemented with relevant radiographs, clinical photographs and charting.*	✓		

Document	Uploaded online	Certified by an authorised witness	Physical document required
Additional requirement for dental specialists Summary of cases treated over last five years, demonstrating the full range of treatment within your scope *Including relevant patient details (while protecting the privacy of the patient), clinical condition/diagnosis, treatment provided and the length of follow up/success.*	✓		
Evidence of research activity *This should include your thesis, and any publications completed since graduation.*	✓		
Continuing professional development *This should include all courses you have completed over the past three years. This CPD template must be used for presenting your activities if you do not already have an existing logging system/file.*	✓		

Current and past registrations

Document	Uploaded online	Certified by an authorised witness	Physical document required[3]	Submitted by an outside source
Certificates of good standing from the Boards/Councils where you have held registration overseas in the last 7 years *These must be emailed or posted directly to the Dental Council by the issuing authority and be no more than three months old at the point you submit a complete application. The document must include your registration/licensure status and date of initial registration.*			✓	✓

Examination

Document	Uploaded online	Certified by an authorised witness	Physical document required
Examination results *Including any successful or failed examinations in New Zealand and overseas.*	✓	On request	On request

English requirements

Document	Uploaded online	Certified by an authorised witness	Physical document required	Submitted by an outside source
English test results which are less than two years old *Please refer to the Council's Registration policy for further details.* *Where applicable, you will need to share the results to the Dental Council using the provider's online portal, so that the results can be verified by Council staff*	✓			

[3] An original physical copy is required unless the issuing authority emails a copy directly to the Dental Council.

Professional referees

Document	Uploaded online	Certified by an authorised witness	Physical document required	Submitted by an outside source
Three referee reports from clinical peers *These must be completed using the Council's referee report template and meet the requirement set out on the cover page of the referee report.*				✓