USER GUIDE

Supporting documents for applications

New graduates (NZ)
Orthodontic auxiliaries

Important information

- When you apply for registration, you need to provide documents to support your application. You can upload most documents 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 be indicated in your online 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.
- If you have been registered with another health regulator in the last 7 years, certificates of standing/licensure verifications will need to be emailed or posted directly to us from the issuing authority. Certificates of standing must not be older than 3 months at the point you provide a complete application for assessment.
- 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 my eQuals portal	Certified by an authorised witness[1]	Physical document required[1]
AUT and University of Otago graduates				
The qualification certificate/s or academic transcript upon which you are basing your application		✓		
Royal Australasian College of Dental Surgeons (RACDS)				
The qualification certificates upon which you are basing your application	✓		✓	✓
Orthodontic auxiliaries				
Trapezio certificate, OATP final assessment certificate, NZAO Certificate of Orthodontic Assisting (where applicable)	✓		✓	✓

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.*	✓		

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

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.*	✓		