USER GUIDE

# Supporting documents for applications

Removal of conditions

## Important information

- A change of scope application is for registered practitioners who are applying to change or remove conditions on their scope of practice that were applied at registration or after applying for a practicing certificate.
- When you apply for a change to your authorised scope of practice you need to provide documents to support your application. Most documentation can be uploaded with your application, but you may need to send some documents to our office via 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.
- 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.

**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<br>Level 7, 22 The Terrace<br>Wellington 6011<br>NEW ZEALAND | The Dental Council<br>PO Box 10-448<br>Wellington 6140<br>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.

## Removing or changing your registration condition

| Document | Uploaded online | Verified internally by staff | Submitted by outside source |
|---|---|---|---|
| Supervision reports<br>*Only upload reports that have not already been submitted to the Council* | ✓ | | |
| Attestation from your supervisor or oversight practitioner<br>*This needs to be emailed to the Council by your supervisor/oversight practitioner* | | | ✓ |
| Evidence of completion of Oral health practice in New Zealand e-learning modules<br>*For practitioners who were required to complete these e-learning modules as part of their oversight or supervision protocol* | | ✓ | |

## Removing or changing limitations or restrictions

| Document | Uploaded online | Shared via Learner/Receiver platform | Certified by an authorised witness[1] | Physical document required[1] |
|---|---|---|---|---|
| Cover letter setting out your request | ✓ | | | |
| Evidence of qualifications/training/professional development in the limited or restricted area | ✓ | On request | On request | On request |
| Any other evidence or documentation that provides evidence of your competence to practise in the restricted/limited area | ✓ | | | |