



MANITOBA DENTAL ASSOCIATION

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CHECKLIST FOR REGISTRATION IN THE DENTAL SPECIALIST CATEGORY

- ☐ Read *Instructional Guide to Completing Dentist Registration Application Form*
- ☐ If already licensed with the MDA, please use the *Dentist Change of Status Application Form*

FORMS

- ☐ Identified *Dental Specialist* as the Registration category and specified your dental specialty
- ☐ Answered all the questions on application and consent forms in the Registration Package
- ☐ Attached a passport-type photograph to the *Dentist Initial Registration Application Form*
- ☐ Signed *Dentist Initial Registration Application Form* and had it properly witnessed and notarized
- ☐ Completed and signed release forms for third party assessors, health providers and prior regulatory bodies
- ☐ Completed and signed *Declaration of Commitment to Ethical Practice and the Public Interest*

SUPPORTING DOCUMENTS - PERSONAL

- ☐ Certified copy evidencing a name change, if you changed your name
- ☐ Certified copy of government issued photo identification
- ☐ Certified copy of citizenship, permanent residency or work permit

SUPPORTING DOCUMENTS - EDUCATION AND ASSESSMENT

- ☐ Certified copy of dental degree
OR original letter sent directly from Dean of Faculty where completed your dental degree to MDA
- ☐ Certified copy of NDEB certificate
- ☐ Certified copy of dental specialty degree
OR original letter sent directly from Dean of Faculty where completed your specialty degree to MDA
- ☐ Certified copy of NDSE certificate or Fellowship from the Royal College of Dentists of Canada
- ☐ Certified copy of hospital-based internship if you had completed a hospital-based internship
OR original letter sent directly from Dean of Faculty where completed a hospital-based internship to MDA
- ☐ Proof of appropriate malpractice insurance
- ☐ Proof of valid resuscitation/life support training
- ☐ Proof of Canadian jurisprudence and ethics training
- ☐ Two letters of reference – signed and dated sent directly to MDA

SUPPORTING DOCUMENTS - PRACTICE HISTORY

- ☐ Requested Certificate of Standings for each regulatory body of prior health professions and jurisdictions
- ☐ Attached separate sheets with written details as requested on *Dentist Initial Registration Application Form*
- ☐ Enclosed separate payments for the registration and initial licensure fees

FEES FOR REGISTRATION AND LICENSURE IN THE DENTAL SPECIALIST CATEGORY

Registration - application fee \$ 650.00

Licensure - initial application

- For registrant before 1st of September in year of application \$3750.00
- For registrant in the year of graduation from a dental training programme \$2750.00
- For registrant on or after 1st of September in year of application \$2750.00