MANITOBA DENTAL ASSOCIATION 202-1735 Corydon Ave. Winnipeg, MB R3N 0

Licensure - initial application

202-1735 Corydon Ave. Winnipeg, MB R3N 0K4 T: 204.988.5300 F: 204.988.5310 www.manitobadentist.ca

CHECKLIST FOR REGISTRATION IN THE STUDENT CATEGORY

	Read Instructional Guide to Completing Dentist Registration Application For	rm
	If already licensed with the MDA, please use the Dentist Change of Status	Application Form
FORMS		
	Identified <i>Student</i> as the Registration category and specified your internsh	ip or graduate training programme
	Answered all the questions on application and consent forms in the Regist	
	Attached a passport-type photograph to the <i>Dentist Initial Registration Ap</i>	J
	Signed Dentist Initial Registration Application Form and had it properly wit	
	Completed and signed release forms for third party assessors, health prov	
	Completed and signed <i>Declaration of Commitment to Ethical Practice and</i>	
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 you	r dental degree to MDA
	Certified copy of NDEB certificate	
	Certified copy of dental specialty degree	r consists, degree to MDA
	<u>OR</u> original letter sent directly from Dean of Faculty where completed you Certified copy of NDSE certificate	r specialty degree to MDA
	Certified copy of Nospital-based internship if you had completed a hospital	al-hased internshin
Ш	OR original letter sent directly from Dean of Faculty where completed a ho	
	Proof of appropriate malpractice insurance	·
	Proof of valid resuscitation/life support 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 STUDENT CATEGORY		
Registration - application fee \$ 650.00		
registration - application ree		Ψ 0.00.00

\$ 450.00