

Application for Transfer Package for Dental Hygienists who are in Good Standing on the ACDH Non-Practicing Register

This registration package is intended for dental hygienists who are in Good Standing on the ACDH Non-Practicing Register and who are applying to transfer to the General Register. If you are not on the Non-Practicing Register, or your registration with the College has been cancelled, this is NOT the registration package for you. Please refer to our website to see which application package applies to your circumstances. If you have any questions, please contact our office.

It is strongly recommended that all applicants read the first document in this package thoroughly as it contains important information regarding requirements to apply and answers to commonly asked questions.

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8. CPR Certification Declaration Statement for Instructors (1 page)

Submitting an Application

Applications and supporting documents can be mailed to or hand delivered to:

Registration
Alberta College of Dental Hygienists
Suite 302, 8657 – 51 Avenue NW
Edmonton, AB, T6E 6A8

Applicants may choose to send their applications via registered mail. Please be aware that requesting a signature upon delivery may delay receipt of the application by the College.

Supporting documents that do not require notarization or an original signature may be emailed to registration@acdh.ca.

Inquiries

The College would be pleased to answer any questions regarding an application for transfer to the General Registrar. All correspondence and inquiries should be directed to the Registration Team by phone at (780) 465-1756 or by email at registration@acdh.ca.

Please note: There are blank pages inserted into this document to allow for double-sided printing.

Information for Persons Transferring from Non-Practicing Registration to General Registration with the Alberta College of Dental Hygienists

(For Dental Hygienists who are in Good Standing on the ACDH Non-Practicing Register)

REGISTRATION IS MANDATORY – All Service Providers Must Register

Changes to the Non-Practicing Register

The ACDH will no longer have a non-practicing register as of November 1, 2024. Individuals who are currently on the non-practicing register have three options:

1. Transfer to the General Register in the current permit year (prior to November 1, 2024).
 - *An application must be complete no later than September 30, 2024*
 - *Registrants must complete a renewal application for the 2024/25 permit year.*
2. Transfer to the General Register to obtain their practice permit ON November 2, 2024 for the 2024/25 permit year.
 - *An application must be complete no later than October 31, 2024.*
3. Cancel their registration.

Please refer to the [Transfers](#) page on the ACDH website for details about what these options mean.

General Registration

Regardless of a person's license status in any other province, state, or country, they must comply with the *Health Professions Act* (the "Act"), the *Health Professions Restricted Activity Regulation* (the "HPRAR"), the *Dental Hygienists Profession Regulation* (the "DHPR"), and the registration process of the Alberta College of Dental Hygienists (the "College" or "ACDH") if they are to be involved in the practice of dental hygiene in the province of Alberta.

In accordance with section 46 of the Act, a person must apply for General or Courtesy Registration with the College if they intend to provide one or more of the following services in the province of Alberta:

- Professional services directly to the public;
- The manufacture of dental appliances;
- The teaching of the practice of dental hygiene to regulated members or students; or
- The supervision of regulated members who provide professional services to the public.

A person must hold General Registration and a Practice Permit whether they intend to practice dental hygiene as an independent practitioner, a permanent or temporary employee, a contractor, or a volunteer for any portion of the year - even if it is just one day.

General registration is for applicants who wish to engage in activities or services that involve the knowledge and/or practice of dental hygiene as a clinician, educator, administrator, health promoter, consultant, or researcher. A Practice Permit will be issued when an application for General registration is approved and must be renewed annually.

An applicant may not practice dental hygiene in the province of Alberta until they have received notification that their application has been approved and they have been added to the ACDH General Register.

This includes temporary assignments or working interviews.

Applying to Transfer from the Non-Practicing Register to the General Register

Any Non-Practicing individual in good standing on the Non-Practicing Register is eligible to apply for transfer to the General Registration category on the Regulated Members Register, provided they have paid any outstanding fees, penalties, or levies, and they meet the requirements for registration as outlined in this document.

Starting the Registration Process

It is strongly recommended that the transfer process is started well in advance of any pre-arranged employment. The College works to process applications as quickly and efficiently as possible, however there are factors that can impact the time it takes to process an application for transfer. These factors include the time of year an application is made, what, if any documentation is missing from the application, or if there are additional assessments needed to make a decision on the application.

General Requirements

1. Application Forms, Fees, and Process

An application for transfer must be made on the current and required form. All applications will be reviewed and processed on an individual and equal basis. No application will take priority over another.

Fees listed on the application for transfer form must be paid in Canadian funds by two (2) separate certified cheques, bank drafts, or money orders made payable to the ACDH: one for the application fee, and one for the annual registration fee, minus the Non-Practicing fee already paid at the beginning of the registration year. **Personal cheques will not be accepted.** Fees must be included with the application for transfer. The application fee is non-refundable.

The application stage of the process starts when a completed, signed application form is received by the College. All supporting documentation should be received by the College within six (6) months of receipt of the application form. An application will not be considered complete until all required information, documentation, and fees are received, and reviewed by the College, and all required qualification and competence assessments have been completed. The College may verify any documentation provided and additional supporting documentation may be requested at any stage during the application or review process.

The review stage of the process generally takes four (4) weeks **after an application is made complete** but may take longer if additional information is required to make a decision or if an application is received between August and November, which is the College's annual renewal period.

Applications received after September 30, 2024, will automatically be put forward for consideration no later than October 31, 2024.

The process used by the College to assess each application is as follows:

1. A completed, signed, and dated application form is received by mail.
2. The College sends an email to the applicant confirming that the application form has been received and an initial review has been started.
3. The College sends an email to the applicant notifying them that the initial review has been completed and if the application is not complete, the email will list the items that are outstanding.
4. The College provides log-in information to the Jurisprudence Examination by email if necessary.
 - *The College process is on hold until the required documentation is received, including evidence of successful completion of the Jurisprudence Exam.*
5. The College sends an email to the applicant notifying them that their application has moved to the final review stage.
6. If the final review finds that additional information is required, the College sends an email to the applicant listing the items that are required.

- *The College process is on hold until the requested documentation is received.*
7. The Registrar or their delegate reviews the application and supporting document and makes a decision.
The Registrar may approve an application, with or without conditions; defer registration; or refuse the application for registration. In each case, the College is guided by an assessment of what is in the best interest of the public.
 8. The College sends an email to the applicant to notify them of the Registrar's decision.

2. ACDH Continuing Competence Program Requirements

Within the **three years immediately preceding** the date a complete application for transfer is received by the College, applicants for transfer must provide evidence of meeting the same continuing competence program requirements as a general member under section 3(2)(b) of the DHPR. These requirements are:

- *600 hours of practice as a dental hygienist*, as outlined in section 5 of the [Registration and Practice Permit Renewal Policy](#). This history is to be listed in the application form under Employment History, and supported by a signed letter from the applicant's employer or copies of Records of Employment (ROEs) for each entry listed; **and**
- *45 credits (hours) of professional development as a dental hygienist*, listed on the provided attachment and supported by relevant course information and completion documentation.

If an applicant meets the practice hour requirement but does **not** meet the professional development credits, they will be required to do one of the following:

- Engage in further learning activities until they meet the 45-credit requirement; **or**
- Successfully complete the National Dental Hygiene Certification Exam (NDHCE).

If an applicant does not meet the practice hour requirement, regardless of whether they meet the professional development requirements, they will be required to provide evidence of successful completion of a Council-approved dental hygiene refresher or remedial education course. The course must include didactic and clinical components and be completed *no longer than 12 months prior to application for transfer*.

Applicants who have not practiced in 3 to 5 years will need to successfully complete a 5-day dental hygiene education refresher course. Applicants who have not practiced in more than 5 years will need to successfully complete a 10-day dental hygiene education refresher course.

If a Non-Practicing individual has been on the Non-Practicing Register for less than one calendar year by the time that their application to transfer to the General Register has been approved, the continuing competence program reporting period will continue as if there had been no interruption in registration status.

3. Jurisprudence Examination

The ACDH Jurisprudence Examination is comprised of a series of learning modules and exams and is only available in English. The exams are designed to test the applicant's knowledge of the legislation, Code of Ethics, Standards of Practice and Guidelines, and other regulatory documents that govern the practice of dental hygiene in the province of Alberta. Dental hygienists must be familiar with and comply with provincial legislation and the College's regulatory documents. Failure to do so may result in being subject to disciplinary action. Under section 4 of the DHPR, an applicant for registration must have successfully completed the ACDH Jurisprudence Examination within the **36 months (3 years)** prior to the date the application is made complete.

The learning modules and exams are located on the College's secure learning management system and contain all required instructions and resources. The modules and exams are open-book and can be completed at an applicant's convenience.

Applicants must complete the section of the application form requesting access to the exam and authorizing the College to use the personal information provided to the learning management system to manage the modules and the applicant's completion of the exam.

4. Good Character and Fitness to Practice

Section 28 of the Act requires applicants to provide written evidence of having good character and reputation. Applicants must provide evidence of having good character and reputation by:

- Answering all questions on the Application for Transfer related to previous or current registration and/or applications for registration, unprofessional conduct processes, disciplinary action, and criminal offences;
- Listing all jurisdictions in which they are currently or were previously registered/certified/licensed to practice dental hygiene or any other health profession; and having each jurisdiction complete the Verification of Registration Form and mail it directly to the ACDH;
- Answering all questions related to good character and fitness to practice; and
- Providing relevant evidence requested by the Registrar or Registration Committee.

a. Verification of Registration

If an applicant is or was certified, licensed, or registered to practice any regulated health profession, the applicant must complete Section A of the [Verification of Registration form](#). A copy of the entire verification form (sections A and B) must be sent to each regulatory authority where the applicant is currently or was previously certified, licensed, or registered. Section B must be completed by the regulatory authority and sent directly to the College **no longer than 6 months prior** to the date the application is made complete.

If a Verification of Registration is returned with a finding of unprofessional conduct based on sexual misconduct or abuse, a full disclosure will be requested from the applicant and the regulatory authority and the application may be referred to the Registration Committee for decision.

b. Vulnerable Sector Checks

All applicants must provide a vulnerable sector check issued within 1 year prior to the date the application is made complete. A basic criminal record check will not be accepted. The vulnerable sector check can only be conducted by the local police service (or RCMP detachment if there is no local police service). Some police services require a letter from the College to process the request. There is a link to a standard letter available in the application package for this purpose. If a police service requests an Agency Code, please contact the College. The College will accept an original document in a sealed envelope, a **notarized**¹ copy, or an electronic version sent directly from the local police service to the College.

c. Protecting Patients from Sexual Abuse and Misconduct

Under section 135.7(2) of the Act, all regulated health professionals in Alberta must successfully complete training on preventing and addressing sexual abuse and sexual misconduct towards clients.

Applicants for registration with the College are required to complete the e-learning course “Protecting Patients from Sexual Abuse and Misconduct.” This interactive e-learning course was developed by the Alberta Federation of Regulated Health Professions (AFRHP) and is available via the AFRHP website here: afrhp.org/protecting-patients/

The course consists of three modules that will familiarize applicants with the section of the Act and how to prevent, recognize and respond to sexual abuse and sexual misconduct. Please note, the course must be completed in one session – applicants are unable to exit the course midway then re-enter at a different time to finish the content. Once the course has been completed, the program will generate a “Certificate of Completion”, which must be submitted with an application for registration.

Please note that this course includes scenarios depicting sexual abuse and misconduct that may be disturbing or triggering to some viewers. If you have concerns, please speak, in confidence, to the College Registration Lead.

5. Professional Liability Insurance

Section 28 of the Act requires that applicants provide evidence of having professional liability insurance. The College requires all persons on the General register to have insurance that meets the minimum standard as approved by Council.

Applicants are strongly advised to review section 3 of the [Registration and Practice Permit Renewal Policy](#) found on the Policies page of the ACDH website prior to submitting their application to ensure they have met the requirements. Insurance that does not meet the requirements is not acceptable.

Applicants must upload a copy of a valid insurance certificate showing the minimum requirements. Receipts or membership cards are not acceptable as evidence of insurance. Enhanced insurance options may be of particular interest to registrants who perform advanced restricted activities procedures (local anaesthesia, nitrous oxide/oxygen conscious sedation, restorative procedures, orthodontic procedures, etc.).

6. CPR Certification

Section 9 of the DHPR requires that applicants provide evidence of current CPR certification. Applicants must provide evidence of having successfully completed a CPR course at the level approved by Council. CPR certification training must include theoretical instruction and assessment and an in-person, hands-on component for skills practice and evaluation.

Applicants are strongly advised to review section 2 of the [Registration and Practice Permit Renewal Policy](#) found on the Policies page of the ACDH website prior to submitting their application to ensure they have met the requirements. CPR that does not meet the requirements is not acceptable.

The course must be completed no longer than 12 months prior to the date the application is made complete. Applicants must include a completed [CPR Certification Declaration Statement for Instructors](#) along with a copy of their current CPR wallet card/certificate as evidence of holding CPR certification at the required level.

7. Competence to Practice Advanced Restricted Activities

Sections 8 and 9 of the HPRAR identify “restricted activities” that dental hygienists are authorized to practice. As these restricted activities involve a significant degree of risk to the public, they can only be performed by individuals with specific competencies. Competencies related to many of the restricted activities authorized in the Regulation are taught in the basic curriculum of accredited dental hygiene educational programs (e.g., scaling, root planing, exposing radiographs).

Competencies related to the following restricted activities, which are included in Alberta dental hygienists’ scope of practice, are not inclusive in all dental hygiene educational programs:

- a. Prescribing and administering local anaesthesia by injection;
- b. Prescribing and administering nitrous oxide/oxygen for the purpose of conscious sedation;
- c. Restorative procedures of a permanent nature in collaboration with a dentist;
- d. Orthodontic procedures including preliminary fitting of appliances in collaboration with a dentist;
- e. Preliminary fitting of periodontal appliances in collaboration with a dentist; and
- f. Prescribing the Schedule 1 Drugs listed in the HPRAR

Applicants for registration are not required to demonstrate competence in the restricted activities listed as (a) to (f) for the purpose of initial registration.

If, on the registration application form, an applicant identifies that they have completed formal classroom and clinical education related to one or more of the restricted activities listed as (a) to (f) above, a separate application for authorization to perform the restricted activity must be submitted to the College **within 6 months of completing their education**, or with appropriate evidence of currency.

The [Advanced Restricted Activities policy](#) can be found on Advanced Restricted Activities page of the ACDH website. The application form is available through the Registrant Portal after an application for transfer has been approved.

At any time while registered, a registrant may successfully complete a Council-approved course related to performing one of the restricted activities listed as (a) to (f) above and may apply for authorization to perform the activity. The application form and all required supporting documents must be submitted for review **within 6 months of completing their education.**

No applicant may perform an advanced restricted activity until the applicant has received notification that the application for authorization to perform the advanced restricted activity has been approved.

8. Submitting an Application

Applications and supporting documents can be mailed or hand delivered to:

Registration

Alberta College of Dental Hygienists
Suite 302, 8657 – 51 Avenue NW
Edmonton, AB, T6E 6A8

Applicants may choose to send their applications via registered mail. Please be aware that requesting a signature upon delivery may delay receipt.

Supporting documents that do not require notarization or original signature may be emailed to registration@acdh.ca.

9. INQUIRIES

The College would be pleased to answer any questions regarding an application for transfer. All correspondence and inquiries should be directed to the Registration Team by phone at (780) 465-1756 or by email at registration@acdh.ca.

ⁱ A notarized copy is one which is certified as a true copy of the original by a lawyer, judge, MLA, or other individual designated as a Notary Public. A Notary Public must sign, stamp and seal notarized documents. Photocopies or electronic copies of notarized documents will not be accepted. A Commissioner of Oaths **cannot** notarize documents.

Privacy Statement

The Alberta College of Dental Hygienists (ACDH or the College) considers your privacy to be of utmost importance and is committed to maintaining the privacy of registrants and applicants for registration.

Collection of Your Personal Information by the College

The College is required to obtain information from you to comply with legal requirements of the *Health Professions Act* (the “HPA”) and the College Bylaws.

1. Section 33(3) of the HPA

Under section 33(3) of the HPA, the College is required to maintain a Register of individuals on the General or Courtesy Registers (the “Regulated Registers”). This section requires the College to collect and maintain the following information for each registrant on the Regulated Registers:

- their full legal name,
- their unique registration number,
- if they have been authorized to practice any advanced restricted activity,
- if any restrictions or conditions have been placed on their practice permit, and
- the status of their practice permit, including suspensions or cancellations.

Section 34 of the HPA requires that the information collected under s. 33 must be made available to members of the public. The College does this through the Verify a Dental Hygienist section of the College website.

2. Section 33(4)(b) of the HPA

Individuals applying for registration and registrants on the Regulated Registers, and individuals on the Non-Regulated Register are required to provide and keep updated the following specific personal and demographic information:

- Personal information including:
 - full legal name and any previous legal names
 - gender
 - date of birth
 - contact information (home address, cell phone number, and email address)
- Academic and practical training information including:
 - qualifications
 - name of the institution
 - date of graduation
- Current and historical employment information including:
 - place of employment
 - employment type (i.e. clinical, administrative, education, research)
 - employer’s name, and employer contact information
- Practice information including:
 - number of practice hours as a dental hygienist for the previous year;
 - area of practice and specialties;
 - any languages other than English in which the member can provide professional services
 - any jurisdictions other than Alberta where the member is registered to practice dental

hygiene or another regulated health profession

3. Section 14(1) of the ACDH Bylaws

Section 14(1) of the ACDH Bylaws limits the information that can be collected for individuals on the Non-Practicing Register to the following:

- Personal information including:
 - full legal name and any previous legal names
 - gender
 - date of birth
 - contact information (home address, cell phone number, and email address)
- Academic and practical training information including:
 - qualifications
 - name of the institution
 - date of graduation
- Historical employment information including:
 - place of employment
 - employment type (i.e. clinical, administrative, education, research)
 - employer's name, and employer contact information
- Practice information including:
 - any languages other than English in which the member can provide professional services
 - any jurisdictions other than Alberta where the member is registered to practice dental hygiene or another regulated health profession

Other information may be requested and provided by the individual with their consent.

Use and Disclosure of Your Personal Information by the College

Information collected under section 33 of the HPA and section 14(1) of the Bylaws is relevant to the College's registration processes and operational activities. The College keeps this information in the strictest confidence and does not make it available to the public except for the purposes set out below.

4. Mandatory Use and Disclosure

The College will use information provided by or on behalf of applicants for registration and the College's regulated registrants as authorized by the *Personal Information Protection Act* (PIPA) and for the following purposes:

- to manage and conduct the business and affairs of the College in accordance with the HPA, Regulation, Bylaws and policies;
- to provide the regulatory services requested by you;
- to release information for purposes of a letter of good standing to another regulatory authority;
- to release information for the purposes of interprovincial trade agreements and memorandums of understanding between Canadian dental hygiene regulatory authorities;
- to release information that is necessary to satisfy any law, regulation or request from the Minister;
- to publish the list of names of regulated and cancelled registrants in order that the public, employers and other health care providers can confirm the registration status of dental hygiene service providers;
- to release information that is necessary for participation as a recognized provider of dental hygiene services under government funded dental health programs (e.g. Alberta Blue Cross, Alberta Dental Services Corporation, Non-Insured Health Benefits Program);
- to release information to the Government of Alberta for the purpose of establishing dental hygiene workforce records within the Alberta Provider Directory, a comprehensive health workforce planning tool and a source of identifying unique providers in a new Electronic Health Record

system;

- to release information for purposes of meeting provincial and federal government requirements; and
- to publish information as required by an order of any Tribunal or Committee in accordance with the Act, the Regulation and/or the Bylaws.

The information of individuals listed on the Non-Practicing Register is used and disclosed in a manner consistent with the above.

5. Use of Service Providers outside Canada

Most of the College's service providers are located in Canada. However, from time to time, the College also uses service providers located in the USA. The College evaluates the capabilities, practices, safeguards and trustworthiness of potential service providers outside Canada prior to their engagement. The College takes reasonable steps to protect registrant information handled by a service provider who is engaged by the College, usually by way of a contract for services which contains appropriate safeguards.

American service providers used by the College (e.g. Constant Contact) are permitted to collect and/or use your personal information for the following purposes:

- to assist the College in sending and managing electronic and/or other communications to registrants about College registration, annual renewal requirements, and other regulatory information of interest to registrants; and
- to assist the College in sending and managing electronic and/or other communications to registrants and others about events such as conferences, workshops and continuing education opportunities, or about College activities and other information of interest to registrants.

Contacting the College

The College provides applicants for registration, registrants on the Regulated Registers, and individuals on the Non-Regulated Register with access to their own personal information as held by the College through the Applicant or Registrant Portals. Any required changes can be requested by completing and submitting one of the forms included in the Portals.

If you do not have access to the Applicant or Registrant Portals and would like to request a change to your personal information, you can contact the College in the following ways:

By Mail: Alberta College of Dental Hygienists
Suite 302, 8657- 51 Avenue N.W.
Edmonton AB T6E 6A8

By Phone: 780-465-1756

By Email: info@acdh.ca



Transfer to General Registration Application Checklist (Dental Hygienists in Good Standing on the ACDH Non-Practicing Register)

To avoid delays in processing your application, please use the following checklist to ensure that you have included all the necessary documentation before mailing your *Application for Transfer* form to the Alberta College of Dental Hygienists (the College or ACDH). The College will review and may verify any documentation provided as part of an application for transfer.

Complete **all** sections of the application form. **Print** in ink. If a section is not relevant to your situation, write "N/A" in the space.

Please see the Transfer Application Policy for information about each requirement.

General Requirements

Have you:

- ☐ Completed all sections of the Application form?
- ☐ Signed and dated the Statutory Declaration on the Application form?
- ☐ Enclosed the appropriate fees in the form of two certified cheques or money orders made payable to ACDH?
 - ☐ One **certified** cheque or money order for the non-refundable application fee
 - ☐ One **certified** cheque or money order for the registration fee

Documentation to be Submitted Directly to the College

Have you requested that the applicable following documentation be submitted directly to the College?

- ☐ A Vulnerable Sector Check completed within 1 year from the date it is received by the College
- ☐ *Verification of registration / certification / licensure from the Regulatory College in **each** jurisdiction where you are or have been registered / certified / licensed as a dental hygienist or as any other regulated professional*

Additional Required Documentation

Have you enclosed the following documentation?

Evidence of meeting the ACDH Continuing Competence Program requirements within the 3 years immediately preceding the completion of your application for reinstatement:

- | | | |
|---|-----------|---|
| <ul style="list-style-type: none"><input type="checkbox"/> Documents supporting the employment history listed on the Application form and<input type="checkbox"/> Supporting documents for the continuing competence program courses listed on the Personal Record of Professional Development Activities form. | OR | <ul style="list-style-type: none"><input type="checkbox"/> Evidence of completion of a Council-approved dental hygiene refresher education course |
|---|-----------|---|
- ☐ *Completion certificate for the e-Learning course "[Protecting Patients from Sexual Abuse and Misconduct](#)". (if necessary)*
- ☐ *ACDH Jurisprudence Examination Application form (if necessary)*
- ☐ Evidence of liability insurance (copy of liability certificate showing the [minimum requirements](#))
 - ☐ A copy of current CPR certification at the [required level](#)
 - ☐ [CPR Certification Declaration Statement for Instructors form](#)

Advanced Restricted Activities

If you would like to apply for entry onto the Advanced Restricted Activities roster, please read the [Advanced Restricted Activities Policy](#) and submit the online application form which is accessible on the Registrant Portal after an application for transfer has been approved. This separate application must be submitted to the College **within 6 months of completing your education**, or with the appropriate evidence of currency.

APPLICATION FOR TRANSFER FROM NON-PRACTICING TO THE GENERAL REGISTER OF THE ALBERTA COLLEGE OF DENTAL HYGIENISTS (ACDH)

(For Dental Hygienists who are currently on the Non-Practicing Register)

ELIGIBILITY
<p>Individuals on the ACDH Non-Practicing Register in good standing who wish to return to practice in Alberta may apply for transfer to General Registration on the Regulated Member Register. Non-Practicing individuals must not return to practice until they have been notified that their request for transfer to General Register is approved and a Practice Permit has been issued.</p> <p>Applications for transfer must be approved no later than November 1, 2024.</p>

PERSONAL INFORMATION			
Surname		Given Names	
Other Surnames (if applicable)		Birthdate (DD-MM-YYYY)	
Street Address		City	
Province/State	Postal Code	Email	
Cell Phone (Required) ()	Secondary Number ()	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Prefer to Self Identify	
Initial Registration Date		ACDH Registration #	
FOR OFFICE USE ONLY			
Most Recent Reporting Period:		Date of Switch to Non-Practicing:	

RESTRICTED ACTIVITIES KNOWLEDGE AND SKILLS	
<p>You <i>may</i> be eligible for entry on the Advanced Restricted Activities Roster. If your dental hygiene program included didactic and clinical experience in the following restricted activity areas or if you have completed formal educational courses in these practice areas since graduation, please indicate in the table below. Authorization for Advanced Restricted Activities is not automatically transferred with your registration. You must reapply separately following the Advanced Restricted Activities Policy. The policy can be found on the ACDH website. You can submit an application through the Registrant Portal.</p>	
<input type="checkbox"/> Administration of Local Anaesthesia <input type="checkbox"/> Orthodontic Procedures <input type="checkbox"/> Prescribing Schedule 1 Drugs	<input type="checkbox"/> Administration of Nitrous Oxide/Oxygen Sedation <input type="checkbox"/> Restorative Procedures

OTHER HEALTH CARE PROFESSION REGISTRATION/LICENSURE (not ACDH)

If you were previously registered or licensed to practice dental hygiene or any other regulated health profession, list the regulatory body and jurisdiction below.

Name of Regulatory Body	Province/State/Country	Registration/License #	Expiry Date

EMPLOYMENT HISTORY

List dental hygiene employment for the last three (3) years, starting with the most recent employer. If more space is needed, please attach a separate page. You must provide supporting evidence of this information in the form of a signed letter from employer(s) stating the place of employment, name of the employer, start and end date of employment and the total number of hours worked. You may also provide a Record of Employment (ROE) stating the same.

Employed from: mo. _____ day _____ yr. _____ to mo. _____ day _____ yr. _____		
Name of Employer	Business phone	Total no. of practice hours worked
Street Address	City, Province	Postal Code

Employed from: mo. _____ day _____ yr. _____ to mo. _____ day _____ yr. _____		
Name of Employer	Business phone	Total no. of practice hours worked
Street Address	City, Province	Postal Code

Employed from: mo. _____ day _____ yr. _____ to mo. _____ day _____ yr. _____		
Name of Employer	Business phone	Total no. of practice hours worked
Street Address	City, Province	Postal Code

Employed from: mo. _____ day _____ yr. _____ to mo. _____ day _____ yr. _____		
Name of Employer	Business phone	Total no. of practice hours worked
Street Address	City, Province	Postal Code

Summary of all practice hours worked in the last three years. Begin with the most recent hours.	Year				Total Hours
	Hours				

PROFESSIONAL DEVELOPMENT

Please complete page 5 of this document, the Personal Record of Professional Development Activities page, and enclose with this application. You must provide supporting evidence of the activities listed.

GOOD CHARACTER & FITNESS TO PRACTICE

1.	Has any registration, license or permit entitling you to practice dental hygiene or any other health profession in any province, territory, state, or country ever been denied, cancelled, suspended, approved with conditions, or otherwise limited or restricted in any way?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Have you ever had a finding in the nature of professional misconduct, unskilled practice, incompetency, or incapacity, or a like finding, made against you either in Alberta or elsewhere as a dental hygienist or in a health profession other than dental hygiene?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you ever resolved a complaint or an allegation in the nature of professional misconduct, unskilled practice, incompetency, or incapacity made against you either in Alberta or elsewhere as a dental hygienist or in a health profession other than dental hygiene by agreeing to an undertaking order, resolution agreement or other remedial step?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Are you currently the subject of any reviews, investigations, disciplinary hearings, or proceedings (including criminal proceedings) in any jurisdiction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Have you ever plead guilty to, or been found guilty of a criminal charge in any jurisdiction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Have you ever had a judgement in a civil action against you with respect to your dental hygiene practice?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Are you affected by a physical, mental, or emotional condition or disorder that may impair your ability to provide dental hygiene services in a safe and competent manner? (Includes HBV, HCV, HIV)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Are you affected by an addiction to alcohol, drugs, or other chemicals that may impair your ability to provide dental hygiene services in a safe and competent manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered “yes” to ANY question above, provide a brief explanation. You may also be required to provide further documentation.

STATUTORY DECLARATION

I, _____ (full name), of _____ (city/town) in the

Province/State of _____ **DO SOLEMNLY DECLARE THAT** I am the person making application for registration as a Registered Dental Hygienist in Alberta and that the information provided on this form and its attachments is complete and true in every respect and I understand that my application for registration and a practice permit may be refused or cancelled if I have provided any inaccurate information. I understand that in order to practice dental hygiene in Alberta, I am required by law to be registered and hold a current practice permit with the ACDH, before I commence employment.

I understand that the information I have provided may be verified by the ACDH and I authorize the ACDH to seek additional information from third parties such as educational institutions, regulatory agencies, employers, or other sources as necessary in order to process my application; and I also authorize all such institutions, agencies, or other sources to release such information to the ACDH and for so doing let this be your good and sufficient authority.

Declarant's Signature: _____

Dated this _____ day of _____, 20_____.

PAYMENT OF FEES

Please enclose 2 certified cheques, bank drafts, or money orders made payable to ACDH to be deposited on approval of transfer to General Register.

	Non-Refundable Application Fee	FEE
	Transfer Fee (to be deposited on receipt of application)	\$350.00
<input type="checkbox"/>	Certified cheque, bank draft, or money order enclosed in the amount of:	\$

	General Registration Fee Calculation – Includes Practice Permit	
	ACDH General Registration & Practice Permit	\$599.00
	<i>Less Non-Practicing Fee paid to the ACDH for the current practice year</i>	<i>(\$115.00)</i>
	General Registration Fee for Transfer Applications	\$484.00
<input type="checkbox"/>	Certified cheque, bank draft, or money order enclosed in the amount of:	\$

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Approved by:	College ID #:	Registration Date:	Permit Year	Reporting Period

Personal Record of Professional Development Activities

Summary of activities completed in the last 3 years

Please submit this form (or a copy of your current regulator authority's continuing education transcript) with your Application to Transfer from Non-Practicing to the General Register. You must provide evidence of these activities, either by mail or by email to registration@acdh.ca.

[illegible]

This page may be photocopied if more space is required.

April 5, 2023

Law Enforcement Services

Re: Request for Vulnerable Sector Check

The individual requesting a vulnerable check through your agency is applying for registration on the General Register or Courtesy Register of the Alberta College of Dental Hygienists (ACDH). Under Alberta's Health Professions Act, a person must hold General or Courtesy registration and a practice permit if they intend to practice dental hygiene in Alberta for any portion of the year.

Providing dental hygiene services requires the skills, competencies, and professionalism of the dental hygienist as well as a level of trust on the part of the patient and the public. Dental hygienists in Alberta routinely provide services to seniors, children, or other vulnerable persons.

Given that the College's primary responsibility is public safety in all practice settings, the ACDH Council passed a motion on December 10, 2021, to require a vulnerable sector check as part of the registration application process. This is now an application requirement for registration on the General or Courtesy Registers.

Any questions regarding this registration requirement can be directed to registration@acdh.ca or 780-465-1756, ext. 2.

Thank you,



Amie Dowell, MPH
Registrar & CEO

VERIFICATION OF CERTIFICATION, LICENSE, OR REGISTRATION

This form may be photocopied to send to multiple regulatory bodies.

SECTION A

To be completed by applicant and forwarded with Section B to each jurisdiction where you are or have been certified, licensed, or registered as a dental hygienist or any other regulated health profession.

Surname

Given Names

Other Surnames Names (if applicable)

Birth Date (DD-MM-YYYY)

Street Address

City

Province/State

Postal Code

Email

Cell Number

Secondary Number

()

()

Graduated from:

In City/Province/Country:

Graduation date (month-day-year):

I was certified / licensed / registered in your jurisdiction on:

Number:

I authorize _____ to provide the information requested in Section B
Name of Regulatory/Licensing Body

of this form and any additional information requested by the Alberta College of Dental Hygienists (ACDH) in order to process my application for registration.

Signature of Applicant: _____ Date: _____

SECTION B

To be completed by the jurisdictional regulatory body and forwarded directly to the ACDH.

Please provide the following registration information as authorized by an applicant for registration with the ACDH. Information provided is held in confidence.

Profession: <input type="checkbox"/> Dental Hygienist	Profession: <input type="checkbox"/> Other Regulated Health Profession Professional Title:
DH Certificate / License / Registration #:	Certificate / License / Registration #:
Initial DH Registration Date:	Initial Registration Date:
Expiry Date:	Expiry Date:
DH Certificate, License Registration Status: <input type="checkbox"/> active <input type="checkbox"/> conditional <input type="checkbox"/> temporary <input type="checkbox"/> inactive <input type="checkbox"/> other (explain)	Other Profession Certificate, License Registration Status: <input type="checkbox"/> active <input type="checkbox"/> conditional <input type="checkbox"/> temporary <input type="checkbox"/> inactive <input type="checkbox"/> other (explain)
Has this person's license, registration or permit ever been denied, cancelled, suspended, approved with conditions or otherwise limited or restricted in any way?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this person's license, registration or permit currently denied, cancelled, suspended, approved with conditions or otherwise limited, restricted or under review?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has this person ever had a finding in the nature of professional misconduct, incompetency or incapacity, or a like finding made against them?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this person currently under investigation or involved in any proceedings for conduct in the nature of professional misconduct, incompetency or incapacity or any like investigation or proceeding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the answer to one or more of the preceding four questions above is "Yes", please provide further information.	
<i>The following two questions should be completed by Dental Hygiene regulatory bodies ONLY</i>	
Has this person provided you with evidence of graduation (e.g., diploma or transcript) from the DH program listed in Section A?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has this person provided you with evidence of holding NDHCB Certification? If "Yes, please provide: NDHCB #: _____ Effective Date: _____ If "No" explain why not:	<input type="checkbox"/> Yes <input type="checkbox"/> No
(SEAL)	Signature:
	Print Name:
	Title:
	Name of Regulatory / Certification / Print Name: Licensing Body:
	Province / State/ Country:
	Date:

ACDH JURISPRUDENCE EXAMINATION APPLICATION FORM

Examination Information

Under the *Health Professions Act* and in accordance with the Dental Hygienists Profession Regulation, all applicants for registration on the Alberta College of Dental Hygienists (ACDH) General or Courtesy Registers must successfully complete the ACDH Jurisprudence Examination.

The ACDH Jurisprudence Examination is comprised of a series of learning modules and exams and is only available in English. The exams are designed to test the applicant's knowledge of the legislation, Code of Ethics, Standards of Practice and Guidelines, and other regulatory documents that govern the practice of dental hygiene in the province of Alberta. Dental hygienists must be familiar with and comply with provincial legislation and the College's regulatory documents. Failure to do so may result in being subject to disciplinary action.

The learning modules and examinations are located on the College's secure learning management system. The online learning modules and exams contain all required instructions and resources, are open-book, and can be completed at your convenience.

Once you have completed this form, email it to the College at registration@acdha.ca. You will then be provided with an access code and link to create an account for the ACDH Jurisprudence Examination.

Request to Take the Examination

Surname	Given Names
Email	

Statement of Understanding

I understand that the learning module content and exam questions are the property of the ACDH and that unauthorized disclosure of this content is prohibited. I agree to maintain the confidentiality of the learning modules and exam questions.

By accessing the ACDH Moodle platform, I give express permission for the ACDH to use the personal information provided on this application form and any information provided to the learning management system in order to manage the modules and exams and to verify my completion of the ACDH Jurisprudence Examination.

Applicant Signature

Date

FOR OFFICE USE ONLY

Unique Access Code	Date Access Code Sent	Date Exam Completed
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CPR Certification Declaration Statement for Instructors

This declaration statement is for the following named applicant: _____

Applicants for General or Courtesy Membership or annual renewal of a Practice Permit must provide evidence of having successfully completed a cardiopulmonary resuscitation course for health care providers at the level [approved by Council](#). CPR certification training must include:

- a. theory instruction and assessment; and
- b. hands-on component for skills practice and evaluation.

Certification must include, at a minimum, the following competencies:

- i. one- and two-person rescuer chest compressions for adults, children, and infants;
- ii. one- and two-person rescuer adult, child, and infant bag-valve mask technique;
- iii. rescue breathing for adults, children and infants;
- iv. relief of choking in adults, children, and infants; and
- v. use of an automated external defibrillator.

The course must be delivered in accordance with the recommendations of the International Liaison Committee on Resuscitation (ILCOR) and completed no longer than 12 months prior to issuance of ACDH registration or practice permit renewal.

Please complete the checklist below to confirm that the following requirements were included in the CPR course delivered to the above-named applicant. The signed and dated Declaration Statement may be returned to the ACDH office in person or by mail or email at the addresses above.

Date CPR course was completed: _____

- ☐ one- and two-person rescuer chest compressions for adults, children, and infants
- ☐ one- and two-person rescuer adult, child, and infant bag-valve mask technique
- ☐ rescue breathing for adults, children, and infants
- ☐ relief of choking in adults, children, and infants
- ☐ use of an automated external defibrillator

I, _____, CPR instructor, certify that the information provided on this form is complete and true, and knowing that is of the same force and effect as if made under oath and by virtue of the "Canada Evidence Act". I understand that making a false statement on this application could result in the rejection of the above-named individual's application for a practice permit.

Instructor Contact Information

Instructor Registration #:

Phone Number: ()

Email or postal address:

Signature:

Date: