

NSRDHDTD 2024/25 Registration and Licensing DH Reinstatement Application Checklist



**Dental Hygiene Reinstatement
Reinstatement Application Checklist
Licensing Year Nov 1 2024 to Oct 31, 2025
202-1597 Bedford Hwy, Bedford, NS, B4A 1E7**

Please note: We may already have some of the documents outlined below on file. The NSRDHDTD staff will work with you to ensure you have accurate information regarding the documentation required to complete your application.

I have been informed that the NSRDHDTD has the following documents on file:	
<input type="checkbox"/>	A photocopy of my birth certificate
<input type="checkbox"/>	Evidence of name change, if my current name differs from that on my birth certificate and/or transcript e.g., driver's licence, passport, marriage licence, or other government-issued ID
<input type="checkbox"/>	A passport-like picture (full facial profile) in a format appropriate for a regulator e.g., business casual clothing
<input type="checkbox"/>	Evidence of successful completion of the NS Jurisprudence Examination offered through the NSRDHDTD. The cost to take the online exam is \$50. Once the fee is deposited into our account, you will be provided with a link to complete the exam.
<input type="checkbox"/>	My employment visa or permanent resident card under Canadian Immigration Act (non-Canadian citizens only)
<input type="checkbox"/>	Copy of any English language proficiency tests completed (Mother tongue other than English and/or Dental Hygiene program delivered in a language other than English). See the English Language Requirements .
<input type="checkbox"/>	NDHCB Certificate
<input type="checkbox"/>	Certificate of Completion of any modules completed separately from your DH undergrad program e.g., permanent restorative, orthodontics, LA.
<input type="checkbox"/>	<input type="checkbox"/> My official transcript with proof of graduation from an accredited school OR <input type="checkbox"/> My official transcript with proof of graduation from a non-accredited school, plus a copy of certificate of completion of a Clinical Competency Assessment in a recognized jurisdiction
I have uploaded the following supporting documents (upload within the Reinstatement Application). <i>Note: if you don't upload it with your first submission, you will have an opportunity to upload it later following our review.</i>	
<input type="checkbox"/>	Proof of liability insurance, e.g., CDHA insurance, or another insurance (PLI) that meets the requirements
<input type="checkbox"/>	A copy of my current permanent CPR certificate (i.e., taken within the last 12 months), at the level required by Council
<input type="checkbox"/>	Evidence of <u>45 hours</u> of continuing dental hygiene education within the <u>most recent three years</u> . Please enter your Continuing Education courses (with supporting documentation) online through your NSRDHDTD Portal. <i>(Does not apply to applicants who graduated <u>within</u> the last 36 months.)</i>
<input type="checkbox"/>	Evidence that I have practiced <u>600 hours</u> of dental hygiene in the 3 years immediately before the date of my application <i>(does not apply to applicants who graduated <u>within</u> the last 36 months)</i> . If applicable, this must be in the form of a signed letter from the employer (on letterhead), ROE (Record of Employment), or another acceptable alternative document, as determined by the Registrar.
<input type="checkbox"/>	A current passport-type picture, if requested by NSRDHDTD (required if your photo on file is over 3 years)
I have requested these documents to be sent directly to NSRDHDTD (address above):	
<input type="checkbox"/>	Verification Forms: I have completed Part A of the <i>NSRDHDTD Verification Form for Other Regulatory Bodies</i> and sent the form to each jurisdiction that I am currently (or was previously) certified, licensed, or registered as a dental hygienist. <i>I have requested each jurisdiction to send the completed form directly to the NSRDHDTD.</i>
I require additional documentation:	
<input type="checkbox"/>	I am applying to have my local anaesthesia, orthodontics, and/or permanent restorative competencies recognized. Therefore, I have: Completed the relevant online application form (links are within the general application) and provided any required documentation – <i>Note: These procedures are not mandatory to obtain a practising licence in NS, but you cannot perform them unless you are authorized by the NSRDHDTD.</i>
I have paid the required fees by <u>certified cheque, money order, e-transfer or credit card</u>: (Note: Invoices will be generated for you. Further payment details will be provided in the invoice.)	
<input type="checkbox"/>	\$130.00 Application fee (separate) & non-refundable – must be sent before the application will be reviewed Note: As of April 12, 2023, for all new applications, this fee is waived for applicants if you (1) hold a <u>current unrestricted (full)</u> , practising licence in a Canadian Jurisdiction, and (2) you are in good standing with that jurisdiction.
<input type="checkbox"/>	\$155.00 Registration fee – See note under Application fee. This fee is waived if you meet the same criteria.
<input type="checkbox"/>	\$280.00 Reinstatement fee – You will be advised if you owe a reinstatement fee.
<input type="checkbox"/>	\$560.00 Licence fee (Nov 1, 2024 to October 31, 2025)