



SINGAPORE DENTAL COUNCIL

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APPLICATION FOR DISPLAY OF ADDITIONAL TITLES / QUALIFICATIONS

(Please fill in one application form for each title / qualification applied for)

Name of Dental Practitioner: _____ DCR Number: _____

Name of Title in full: _____ Abbreviation: _____

Name of awarding institution: _____

Country of awarding institution: _____ Year of conferment of title: _____

Field of specialty/sub-specialty (if applicable): _____

For General Dental Practitioners, field of interest: _____

Signature of Dental Practitioner: _____ Date of Submission: _____

Notes

1. Please fill in the checklist overleaf, with a tick in the appropriate box.
2. Attach documentary verification of your declarations on the checklist. These include copies of the certificate, information about the awarding institution and its recognition by local authorities, course syllabus and structure and format of the assessment. You are responsible for providing evidence of all the criteria in the checklist. Absence of relevant evidence will result in rejection of your application.
3. Provide the suggested abbreviation for the qualification or title (to provide evidence of the most widely recognized abbreviation for the qualification in the country of awarding body);
4. If any of your declarations is 'NO', it is veto factor and you do not need to submit this application form. Your title is not acceptable for display.
5. If you have filled in 'YES' to all sections and if the qualification is not in the list of displayable qualifications (DQs), please submit this form to SDC together with an administrative fee of \$50 for each qualification where a further evaluation will be made and the relevant Dental Specialist Accreditation Committee (DSAC) or the Credentials Committee (CC) as appropriate will be asked to give its opinion. Your title will be accepted for display if all criteria are deemed met and the relevant DSAC/CC also assents. A registration fee of \$50 for each qualification is payable on approval. For application of qualifications that are in the list of DQs, only registration fee is required and payable on approval.

CHECKLIST FOR APPLICATION FOR DISPLAY OF ADDITIONAL TITLE / QUALIFICATION

CRITERIA and notes	YES	NO (Veto)	Additional information	SDC Verification
<p>1. If a clinical qualification is it directly related to and consistent with your registered area of dental practice?</p> <p align="center">OR</p> <p>Is the non-clinical qualification relevant to your clinical practice?</p> <p>The subject should directly advance clinical practice and not be peripheral or theoretical.</p>				
<p>2. Is this title OTHER than an honorary title?</p> <p>The title should not be merely conferred, but must be based on training courses. Honorary titles are not accepted for display, except those that have historically been allowed.</p>				
<p>3. Can the qualification be displayed in the country of awarding body?</p> <p align="center">OR</p> <p>Is the qualification conferred eligible for specialist accreditation in the country of awarding body?</p>				
<p>4. Is the issuing body of the clinical qualification accredited by the Ministry of Health or Dental Council or their equivalents in that country as the appropriate authority for the relevant area of practice?</p> <p align="center">OR</p> <p>Is the University that is conferring the qualification of good international standing?</p>				
<p>5. Does the clinical title indicate an advance in GDP, specialty or sub-specialty interest, which is NOT procedure specific?</p> <p align="center">OR</p> <p>Does the non-clinical qualification or title indicate an advance in knowledge beyond your highest clinical qualification?</p> <p>The degree should not represent a lower order of knowledge than your highest clinical qualification and generally should not be obtained prior to achieving your highest clinical qualification.</p>				
<p>6. If a clinical qualification, is eligibility for this title limited to dentists only?</p> <p align="center">OR</p> <p>If this is an non-clinical qualification, this is not relevant (indicate 'NA')</p>				
<p>7. Are there eligibility criteria to enter the program?</p> <p>There should be stated minimum qualifications and minimum duration of practice before entry into a program.</p>				
<p>8. Is there a standard, formal course towards this title?</p> <p>- for clinical course not less than equivalent of 8 weeks full time?</p> <p align="center">OR</p> <p>- if a non-clinical course, not less than one year program</p>				
<p>9. Is there structured assessment and evaluation, examination or defense of a thesis?</p>				
<p>10. Is this title recognized by the relevant DSAC for display?</p> <p>SDC will consult the relevant DSAC / DSAB. <i>You do not have to fill this column.</i></p>				

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