



Arizona State Board of Dental Examiners

“Caring for the Public’s Dental
Health and Professional Standards”

1740 West Adams Street, Suite 2470

Phoenix, Arizona 85007

P: (602)242-1492

E: info@dentalboard.az.gov

W: <https://dentalboard.az.gov>

INITIAL APPLICATION INSTRUCTIONS AND INFORMATION

Thank you for your interest in obtaining a license to practice in a dentistry profession in Arizona. We believe these instructions are a helpful tool to be used to help you achieve success. Please give your application the time and attention needed to accurately answer all questions. As we work together, we are excited for your opportunity and available to help you receive your license. It’s the mission of the Arizona State Board of Dental Examiners (“Board”) to protect the public’s health through judicious licensing, regulation and education. And therefore, it is incumbent on you to share in that mission, which will bring with it your subsequent success. Please treat all patients with the respect and value in which you would want to receive and with the same respect and value you have for your own license.

Please read the following instructions carefully and completely

Below is a checklist to help you understand the Board’s process and to keep you on task of the essential documents needed to support your application.

Please type your respective response for each answer or make the appropriate selection(s). Once complete, including your payment and signature, which may include an electronic signature, please follow the instructions to submit your application to the Board’s office. **You will receive an email confirming your submission. If you do *not* receive the email – either in your inbox or spam folder – then the Board did *not* receive your completed application.** Please be advised, all application materials become the permanent property of the Board and will *not* be returned.

Initial Application Instructions

Complete the initial license application, including signature/e-signature and payment.

Complete the Board’s Statement of Citizenship form **AND** the required support/evidence. The form is available on the application and may also be obtained by [clicking here](#).

If applicable, documentation related to any question that you answered “yes” to in the “Conduct” section of the application.

Attach/submit one **quality** photograph of the applicant’s head and shoulders no larger than the section provided, in the application and not taken more than six months before the date of the application. This is should be a professional type photograph; similar to a passport photo (no duck-lip selfies please 😊).

Submit a copy of your current healthcare provider Cardio Pulmonary Resuscitation (“CPR”) certification showing a future expiration or renewal date.

If you have been licensed/certified in another United States jurisdiction, in any profession, for more than six months, please submit a **digitally certified copy** of your National Practitioner Data Bank (“NPDB”) self-query that is no more than 30 days old. This may be obtained by [clicking here](#) and then by selecting the NPDB’s self-query link.

Submit a copy of your Arizona Fingerprint Clearance Card. If you do *not* have an Arizona Fingerprint Clearance Card, please contact the Arizona Department of Public Safety by [clicking here](#) and following their directions.

Submit a copy of your certificate of completion of the Board’s jurisprudence examination. To take this required, nonrefundable examination, which covers the Board’s statutes (laws) and rules, please follow these simple directions:

The Americans with Disabilities Act: Persons with disabilities may request reasonable accommodations, such as sign language interpreters. Requests should be made as early as possible to allow time to arrange the accommodation. This document is available in alternative format upon request.

Study the Board's statutes and rules by [clicking here](#).

Once prepared, please take the examination by [clicking here](#) and then select the appropriate examination based on your specific dental profession and pay the examination testing fee of \$35.00; and

Submit a copy of your certificate of completion directly to the Board's office.

Please pay all your application fees online using the Board's payment portal, on its website, or by [clicking here](#). You may also pay by a personal, business or cashier's check or a money order payable to the Arizona State Board of Dental Examiners. The licensing fee is prorated until your next birth month when you will have to renew and pay the applicable renewal fee(s). For your profession, you're required to pay the prorated initial license fee, the license type (by exam or credential, see below) and the non-refundable jurisprudence examination fee.

In addition to the aforementioned instructions, applicants are required to provide or make arrangements for another entity to provide additional application materials depending on one of the three processes below and the one that best suits the applicant. (*Denturists may qualify for processes 1 or 3 only*). Many of the remaining items are direct source only documents. For purposes of the following section, "direct source only" means that the documents must be submitted, to the Board, directly from the issuing agency/entity and **cannot be submitted by the applicant**.

- 1. Apply by Examination** – For applicants who successfully completed a clinical examination within five years directly preceding the filing of this application.

Please make arrangements to have your dental school or your dental hygiene school or your denturist school transcripts sent directly to the Board's office. Transcripts must be official and degree conferred.

Completed license verification(s) – If you hold, have held or applied for a dental license in any other United States jurisdiction, please contact each jurisdiction and make arrangements for them to send a verification of your license status directly to the Board.

If you are in the military or employed by the United States government, please make arrangements for a letter of endorsement from your commanding officer or supervisor that confirms your military service or United States government employment record sent directly to the Board.

For Dentists and Hygienists

Please make arrangements to have your written National Board Examination scores electronically accessible by the Board's office. Please [use this link](#) for more information regarding the National Board Examination.

Please make arrangements to have your your scores from a clinical examination administered by another state or testing agency in the United States within five years preceding this application sent directly to the Board's office.

For Denturists

Please make arrangements to have your Board approved examination scores sent directly to the Board's office. Currently, the only Board approved examinations are administered by the Oregon Board of Denture Technology and the Washington State Department of Health Board of Denturists.

- 2. Apply by Credential** – For applicants, *excluding denturists*, who successfully completed a clinical examination more than five years directly preceding the filing of this application.

Please make arrangements to have your dental school or your dental hygiene school or your denturist school transcripts sent directly to the Board's office. Transcripts must be official and degree conferred.

Completed license verification(s) – If you hold, have held or applied for a dental license in any other United States jurisdiction, please contact each jurisdiction and make arrangements for them to send a verification of your license status directly to the Board.

If you are in the military or employed by the United States government, please make arrangements for a letter of endorsement from your commanding officer or supervisor that confirms your military service or United States government employment record sent directly to the Board.

Please make arrangements for another United States dental jurisdiction or clinical testing agency send certified documentation directly to the Board containing your name, date of examination(s) and proof of a passing score.

3. Apply by Universal Recognition – For applicants who are Arizona residents, who hold a dental license in another United States jurisdiction for at least one year and all current or previously held licenses are in good standing.

Completed license verification(s) – If you hold, have held or applied for a dental license in any other United States jurisdiction, please contact each jurisdiction and make arrangements for them to send a verification of your license status directly to the Board.

If you are in the military or employed by the United States government, please make arrangements for a letter of endorsement from your commanding officer or supervisor that confirms your military service or United States government employment record sent directly to the Board.

Submit proof of Arizona residency. Proof of residency may be established by submitting a copy of any of the following:

- A valid Arizona driver's license;
- A current Arizona motor vehicle registration;
- Proof of filing Arizona income taxes in the most recent tax year;
- Arizona voter registration;
- Documentation of a mortgage for an Arizona residence; or
- Military Form 2058.

Once your application is received, Board staff will review your application materials and notify you, in writing, of any deficiencies. Please do *not* be concerned if you receive a deficiency letter. Most, if not all, applicants receive this letter because of the wait time to receive documents from other sources. If deficient, your application will remain in "pending status", for up to 65 days, or until all supplemental documentation is received and all deficiencies are remedied.