

## DENTAL PROFESSIONAL INITIAL REGISTRATION CHECKLIST

The following list identifies what supplemental documentation is required for initial registration.

Additional information pertaining to registration policies and procedures can be found in the applicable *Registration Guidelines* document published by the relevant Statutory Board or Council. Please refer to the Health Council’s Health Professional Registration page for links to the Statutory Bodies *Registration Guidelines* documents.

Supplemental documentation **must** be uploaded and attached to your online application, unless otherwise specified below.

Documentation	Relevant Profession(s)	Notes
Initial Application Form	All	<a href="#">Health Professional Initial Registration Application (cognitoforms.com)</a>
Proof of Eligibility to Work in Bermuda	All	Letter of Employment (for potential guest workers), Bermuda passport copy with stamp, spousal letter, permanent residency card, valid work permit, etc.
Registration Fee Payment	All	An invoice will be sent by e-mail once completed application is submitted. Payment must be made before your application can be reviewed.
Proof of Government Issued Identification	All	<b>Notarized</b> copy of a valid passport or birth certificate.
Proof of true likeness	All	Provide a digital head shot photo. You can take it yourself, as long as image of likeness is clear.
Resume/C.V.	All	Most up to date Resume/C.V.
Two Letters of Professional Reference	All	All references must be current (dated within the last 12 months) and on an official letterhead.
Certificate of Professional Education (COPE)	All	COPE form <b>must</b> be completed and sent directly to <a href="mailto:hpadmin@gov.bm">hpadmin@gov.bm</a> from the institution where professional educational qualifications were obtained. <a href="#">Download COPE form here.</a>
Certificate of Professional Standing (COPS)	<ul style="list-style-type: none"> <li>Dental professionals licensed or registered outside of Bermuda.</li> <li>Visiting practitioners applying for a work permit</li> </ul>	Evidence pertaining to your professional standing in any jurisdiction in which you are licensed or registered is required. Evidence may be attached to your application or emailed to <a href="mailto:hpadmin@gov.bm">hpadmin@gov.bm</a> from the relevant regulatory authority.

CPR Certification	All	Proof of current CPR certification
Specialist Certification	Dental Practitioners applying for registration as a specialist	Proof of specialist certification (i.e. copy of certificate).
Specific Procedures Training	Dental Practitioners who wish to practice and provide: <ul style="list-style-type: none"> <li>○ Implantology</li> <li>○ IV Sedation</li> <li>○ Botox Therapy</li> <li>○ Sleep Medicine</li> <li>○ Aligner Orthodontics</li> <li>○ Nitrous Sedation</li> <li>○ Laser Dentistry</li> </ul>	Proof of professional training in those areas. (i.e. copy of certificate)
Indemnity or malpractice Insurance	<ul style="list-style-type: none"> <li>● Dental Practitioner</li> <li>● Dental Hygienists</li> </ul>	Letter or certificate from insurer with policy details included.
Name Change Verification Documentation	All	Only required if name changed and differs on application and supporting documentation. Copy must be <b>notarized</b> .
Dental Registration Exam	<ul style="list-style-type: none"> <li>● Dental Practitioner</li> <li>● Dental Hygienists</li> <li>● Dental Technologist</li> </ul>	All applicants who wish to register in Bermuda must sit a 2 part Dental Exam administered by the Bermuda Dental Board. The exam booking details will be provided by the Bermuda Health Council upon approval of Initial Application.