



NEW SOUTH WALES

## DENTAL TECHNICIANS REGISTRATION BOARD

### REGISTRATION OF DENTAL TECHNICIANS IN NEW SOUTH WALES

#### 1. THE BOARD

The Dental Technicians Registration Board is the independent statutory body created by the Dental Technicians Registration Act 1975 to maintain the Register of dental technicians and Index of dental prosthetists of New South Wales and administer the Act generally. The aims and objectives of the Board are as follows.

- o To maintain a Register of qualified dental technicians and an Index of qualified dental prosthetists entitled to practise in New South Wales.
- o To arrange examinations and determine the standards to be achieved in those examinations for eligibility to practise as dental technicians or dental prosthetists.
- o To promote the establishment of courses of training for persons wishing to become dental technicians or dental prosthetists in New South Wales.
- o To inquire into the competence of registered dental technicians and dental prosthetists to practise, and suspend or cancel registration or practising certificates, where appropriate.

#### 2. REGISTRATION

Applicants may apply for registration under the Dental Technicians Registration Act 1975, the Mutual Recognition Act 1992 or Trans-Tasman Mutual Recognition Act 1997.

Applicants who are not registered in another State or Territory of Australia or New Zealand should apply under the Dental Technicians Registration Act. *Refer to item 2.1 below and Appendix 1.*

Applicants who are registered in another State or Territory of Australia, or New Zealand, should apply under mutual recognition. *Refer to item 2.2 below and Appendix 2.*

##### 2.1 Dental Technicians Registration Act 1975

Section 15 of the Dental Technicians Registration Act provides that persons who prove to the satisfaction of the Board that they are of good character and have attained the age of 18 years may be entitled to be registered if:-

- 1(a) they have, in the opinion of the Board, satisfactorily completed an approved course of training in technical work; or
- 1(b) they establish to the satisfaction of the Board that they have, within the period of ten years immediately preceding the day on which they apply for registration, been bona fide engaged in carrying out technical work in New South Wales for a period of not less than four years; or
- 1(c) they have, in the opinion of the Board, satisfactorily completed any examination in technical work arranged by the Board for the purpose of determining their knowledge of and skill in carrying out technical work and demonstrated their ability satisfactorily to carry out technical work in New South Wales.

***Approved courses of training under section 15(1)(a)***

The Board has approved the following courses under section 15(1)(a) of the Act, subject to successful completion by applicants of 3,500 hours supervised practice and an examination for registration, conducted or approved\* by the Board.

<i>Course</i>	<i>Awarding authority</i>	<i>Notes</i>
Diploma of Dental Technology	Sydney Institute of TAFE, Sydney, New South Wales	
Diploma of Dental Technology	Southbank Institute of TAFE, Brisbane, Queensland	2006 onwards
Bachelor of Oral Health in Dental Technology	Griffith University, Queensland	2006 onwards
Diploma of Dental Technology	Torrens Valley TAFE, Adelaide, South Australia	2006 onwards
Diploma of Dental Technology	RMIT University, Melbourne, Victoria	2006 onwards
Diploma of Dental Technology	Australian Defence Force Dental School	2006 onwards
Bachelor of Dental Technology	University of Otago, New Zealand	2006 onwards

\*The Board has approved the examination conducted by the Sydney Institute of TAFE, effective from November 2004.

\*The Board has approved the examinations conducted by the interstate and Defence Forces training institutions and the University of Otago, New Zealand, effective from December 2006 onwards. Graduands from the Otago and Griffith University courses are exempt from the 3,500 hours supervised practice rule.

***Expiry date for applications under section 15(1)(b)***

Section 15(3) of the Act provides that a person is not entitled to be registered under section 15(1)(b) of the Act after 1 April 1982.

***Examination for registration under section 15(1)(c)***

Overseas-trained applicants who apply for registration in Australia or New Zealand are required to undertake an examination conducted by the Council of Regulating Authorities for Dental Technicians and Dental Prosthetists Australia and New Zealand Inc (CORA). The examination will be held twice yearly, (Jan/Feb and July).

The examination will consist of three elements, conducted over five days:

- a theoretical (written) examination on day 1, covering:
  - removable acrylic dentures
  - fixed partial dentures
  - orthodontics
  - cast removable partial structures
  - infection control and occupational health & safety
- a practical examination over the following three days, covering:
  - removable acrylic partial denture
  - fixed partial denture
  - orthodontics
  - metal partial
  - complete removable denture
- a viva voce examination on the fifth day, consisting of a discussion about the work undertaken during the theoretical and practical examinations.

Candidates will be expected to demonstrate competency in all aspects of the theoretical and practical examinations.

## APPLICATION PROCEDURES

An application for registration is attached as Appendix 1. The documentary requirements, which must accompany the application, are outlined in the form.

Applicants will be invited to attend an interview with a committee of the Board on the day of a Board meeting (usually the fourth Thursday of each month). The committee will inform the candidate if it considers he or she has met the eligibility criteria and is deemed suitable to sit the examination. The examination will be conducted in English, *and applicants who trained overseas in a language other than English are required to provide evidence from IELTS of having gained a minimum band score of 6 in each Academic skill level. IELTS testing centres are located in various countries (see: [www.IELTS.org/](http://www.IELTS.org/)) and in Sydney at the following institutions: Macquarie University, University of Sydney and the University of Technology, Sydney.*

An examination fee of \$1,500 must be paid to the Board at least one month prior to the examination. That fee is in addition to the \$120 registration application fee, which must accompany this application form.

The Board will issue certificates of registration to successful candidates. Candidates who fail the examination will be informed about their right of appeal.

Applicants for registration are not permitted to work in New South Wales until the Board has granted them registration. Working whilst unregistered is an offence under section 26(1) of the Dental Technicians Registration Act 1975, and a conviction can carry a fine of up to \$5,500.00. Any person who employs an unregistered person is also guilty of an offence under the same section, carrying the same penalty.

## 2.2 Mutual Recognition

Under the provisions of the Mutual Recognition Act 1992 and the Trans-Tasman Mutual Recognition Act 1997 a person who has a current authority to practise as a dental technician/prosthetist in another jurisdiction of Australia, or New Zealand, is entitled to be registered to practise as a dental technician/prosthetist in New South Wales. Mutual recognition provides an additional and alternative avenue to the Dental Technicians Registration Act for obtaining registration.

### Application procedures

An application for registration form is attached as Appendix 2. The documentary requirements, which must accompany the application form, are outlined in the form.

Upon lodgement of a completed application “deemed” registration is granted. Deemed registration entitles the applicant to practise as a dental technician/prosthetist in New South Wales in accordance with the Dental Technicians Registration Act 1975. Applicants will receive a certificate of “deemed registration” indicating the duration of and any conditions that apply to their practice. Deemed registration continues until substantive registration is granted, or until it is cancelled or refused by the Board. Deemed registrants must be notified of such decisions within one calendar month from the deemed registration date. The Board’s decision is subject to appeal to the Administrative Appeals Tribunal. Deemed registration automatically leads to substantive registration within one month of the grant of deemed registration if a written notice to the contrary has not been issued within this month by the Board.

Substantive registration may be postponed or refused in cases where, for example, statements made in the application/notice are found to be materially false or misleading. Applicants granted substantive registration will be issued with a certificate of registration, and in due course with an annual renewal notice.

## 3. FURTHER INFORMATION

Further information is available from:

The Secretary	Telephone:	+61 2 9219 0233
Dental Technicians Registration Board	Facsimile:	+61 2 9211 9318
PO Box K599	E-mail:	dtech@hprb.health.nsw.gov.au
Haymarket NSW 1238	Internet:	www.dtechreg.health.nsw.gov.au
Australia		

## DENTAL TECHNICIANS REGISTRATION ACT 1975

## APPLICATION FOR REGISTRATION AS A DENTAL TECHNICIAN

NEW SOUTH WALES  
DENTAL TECHNICIANS REGISTRATION BOARD

To: The Secretary  
Dental Technicians Registration Board  
PO Box K599  
Haymarket NSW 1238  
Australia

Level 6, Sydney Central  
477 Pitt Street  
Sydney NSW 2000  
Australia

I, *Full name* \_\_\_\_\_

hereby apply to be registered as a dental technician in New South Wales under

- section 15(1)(a) )  
 section 15(1)(c) ) *Applicants are required to check a box here*

of the Dental Technicians Registration Act 1975, and provide the following information in support of my application.

1. PERSONAL DETAILS			
1.1	Surname:		
1.2	Given names:		
1.3	Previous name/aliases [if applicable]:		
1.4	Address:		
1.5	Telephone:	(H)	(W)
1.6	E-mail address:		
1.7	Date of birth:		
1.8	Place of birth:		
1.9	Gender [M or F]:		
1.10	I am: <i>Applicants are required to check a box here</i>	<input type="checkbox"/> an Australian citizen <input type="checkbox"/> a permanent resident of Australia <input type="checkbox"/> other (Please supply details of status)	
2. PREVIOUS REGISTRATION IN NEW SOUTH WALES			
2.1	Have you previously been registered as a dental technician in New South Wales?		<input type="checkbox"/> Yes <input type="checkbox"/> No
2.2	<b>If the answer to Q2.1 is "Yes", please provide the following information:</b>		
	Registration number	DT	Date of removal from Register
2.3	Were you practising as a dental technician in New South Wales during the period you were unregistered?		<input type="checkbox"/> Yes <input type="checkbox"/> No
2.4	<b>If the answer to Q2.3 is "Yes", please provide the following information in respect of each employer:</b>		
2.4.1	Name of dental laboratory	2.4.2 Owner of Dental Laboratory	2.4.3 Date commenced practising
			2.4.4 Date Ceased Practising

Applicant's signature \_\_\_\_\_

**DENTAL TECHNICIANS REGISTRATION BOARD**

<b>3.</b>	<b>QUALIFICATIONS</b>		
3.1	Qualification/s on which the application is based.		
	<i>Degree/diploma</i>	<i>University/Institution</i>	<i>Year conferred</i>
	<i>A certified photocopy is required of the TAFE transcript of academic record or a certified photocopy of the degree/diploma or other award already conferred. If the qualification was issued in a previous name, documentary evidence [marriage certificate, deed poll, or other instrument] of the change of name must be provided.</i>		
3.2	Membership of any dental technician professional association/s		
	<i>Association</i>	<i>Grade of membership</i>	
<b>4.</b>	<b>PRACTICAL EXPERIENCE</b>		
4.1	Applicants are required to complete the attached Statutory Declaration <i>Appendix 3</i> outlining the names of their previous employers, dates of employment, and full details of the type of technical work undertaken.		
<b>5.</b>	<b>REGISTRATION IN OTHER JURISDICTIONS</b>		
5.1	Are you or have you ever been registered, certified and/or licensed as a dental technician or to otherwise practise as a dental technician in any other States, Territories or Countries?		<input type="checkbox"/> Yes <input type="checkbox"/> No
5.2	<b>If the answer to Q5.1 is "YES", please provide the following information in respect of each such registration, certification or licence:</b>		
	<i>5.2.1 Name of State/s, Territory/s or Country/s:</i>	<i>5.2.2 Name of registering, certifying or licensing authority/s:</i>	<i>5.2.3 Date of registration/s, certification/s or license/s:</i>
			<i>5.2.4 Registration number/s [if any]</i>
	<i>If you hold registration in another State, Territory or Country it is necessary for you to arrange for a Certificate of Good Standing to be forwarded to the Board by the registering authority in that State, Territory or Country. The Certificate of Good Standing must be dated within three months of the date of the application.</i>		
<b>6.</b>	<b>CONVICTIONS FOR OFFENCES</b>		
6.1	Have you been convicted of any offence in or outside of New South Wales?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6.2	<b>If the answer to Q6.1 is "YES", please supply the following information in respect of each offence:</b>		
	<i>6.2.1 Date of offence/s</i>	<i>6.2.2 Nature of offence/s</i>	<i>6.2.3 Date of conviction/s</i>
			<i>6.2.4 Court imposing conviction/s</i>
<b>7.</b>	<b>GOOD CHARACTER</b>		
	<b>Refusal of registration</b>		
7.1	Has any application for registration, certification or licensing as a dental technician or as a provider of dental technician services been refused for any reason in another State, Territory or Country?		<input type="checkbox"/> Yes <input type="checkbox"/> No
7.2	<b>If the answer to Q7.1 is "YES", please supply full details.</b>		
	<b>De-registration, suspension etc</b>		
7.3	Has any registration, certification or licensure referred to in item 5.2 above been suspended, withdrawn, revoked, cancelled and/or removed for any reason?		<input type="checkbox"/> Yes <input type="checkbox"/> No
7.4	<b>If the answer to Q7.3 is "YES", please supply full details.</b>		

Applicant's signature \_\_\_\_\_



**DENTAL TECHNICIANS REGISTRATION BOARD**

<b>10.</b>	<b>EVIDENCE OF IDENTITY</b>
10.1	A driver's licence or current passport, <b>OR</b> any two of the following: Bankcard/Credit Card Bank Passbook Current Bank statement Current car registration papers Current telephone, electricity, water rates, gas or council rates account. <i>Must be paid and in applicant's name</i> Expired driver's licence. <i>Within 2 years</i> Australian income tax assessment. <i>Previous year only</i> Medicare card
<b>10a.</b>	<b>EVIDENCE OF ENGLISH COMPETENCY</b>
10a.1	Documentary evidence from IELTS of a minimum Academic band score of six (6) in each skill (applies to applicants who trained overseas in a language other than English).
<b>10b.</b>	<b>EVIDENCE OF COMPLETION OF 3500 HOURS SUPERVISED PRACTICE</b>
10b.1	<b>Documentary evidence (ie pay slips or student log book) of completion of 3,500 hours supervised practice is required from graduands of TAFE and RMIT Dental Technology Courses.</b>
<b>11.</b>	<b>STATUTORY DECLARATION</b>
11.1	Applicants are required to complete the attached Statutory Declaration.
<b>12.</b>	<b>AUTHORISATION</b>
12.1	Applicants are required to complete the attached authorisation for the Board to approach and request information from persons, institutions and organisations as the Board may consider appropriate in order to determine the applicant's eligibility for registration as a dental technician in New South Wales.

\_\_\_\_\_  
*Applicant's signature*

\_\_\_\_\_  
*Date*

**NOTES**

*This application for registration as a dental technician in New South Wales under the Dental Technicians Registration Act 1975 comprises pages 4-9 of the document entitled "Registration of dental technicians in NSW" approved by the New South Wales Dental Technicians Registration Board.*

*A photocopy of any of the documents required to accompany this application may be provided if it is certified by a Justice of the Peace, solicitor or public notary as being a true copy of the original.*

*Each page of the application must be signed by the applicant.*

STATUTORY DECLARATION

I, *Full name* \_\_\_\_\_

of \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ *Address*

do sincerely declare that:

1. I am the applicant for registration as a dental technician referred to in this application;
2. the information supplied by me in this application is complete and true to the best of my knowledge and belief;

and I make this declaration conscientiously believing the same to be true, and by virtue of the Oaths Act 1900.

\_\_\_\_\_  
*Date*

Declared at \_\_\_\_\_  
*Place of declaration*

before me \_\_\_\_\_  
*Applicant's signature*

\_\_\_\_\_  
*Signature of Justice of the Peace*

**AUTHORISATION**

1. I authorise and consent to the Dental Technicians Registration Board of New South Wales and its Secretary, inspectors and employees to approach and request information from persons, institutions and organisations as the Board may consider appropriate in order to determine my eligibility for registration as a dental technician in New South Wales.
2. I indemnify the Dental Technicians Registration Board, its Secretary, inspectors and employees from any actions and claims by any person arising from any request for and supply of information and the consideration and processing of my application for registration as a dental technician in New South Wales.

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*Applicant's signature*

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*Date*





12. **DECLARATION**

I make this solemn declaration, as to the matter aforesaid, according to the law in this behalf made, and subject to the punishment by law provided for any wilfully false statement in any such declaration.

Made and declared at

\_\_\_\_\_ *Place of declaration*

before me

\_\_\_\_\_ *Applicant's signature*

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Signature of Justice of the Peace/Solicitor/Public Notary*

**NOTES**

*This application for registration as a dental technician/prosthetist in New South Wales under Mutual Recognition comprises pages 10-12 of the document entitled "Registration of dental technicians in NSW" approved by the New South Wales Dental Technicians Registration Board.*

*Incomplete applications including omission of payment of the appropriate fee will not be accepted by the Board resulting in deferment of the right to practise. Statements or information which are materially false or misleading will result in postponement or refusal of registration.*

*Please ensure your current Authority to Practise Document is attached to this Application (Item 10).*

*A photocopy of any of the documents required to accompany this application may be provided if it is certified by a Justice of the Peace, solicitor or public notary as being a true copy of the original.*

**FORM A FOR COMPLETION BY ALL APPLICANTS**

**STATUTORY DECLARATION**

I, *Full name* \_\_\_\_\_

of \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Address*

do hereby solemnly and sincerely declare and affirm that I set out below details of my training and experience as a dental technician/prosthetist

Method of tuition:	<input type="checkbox"/> Full Time course	<input type="checkbox"/> Part Time course	<input type="checkbox"/> Apprenticed
--------------------	-------------------------------------------	-------------------------------------------	--------------------------------------

Name of employer/Training Institution	Duration		Hrs of instruction per week			Main areas of instruction
	From	To	Pract	Theory	Total	

Employment Service

Names of and location of employer/s	From	To	Full details of technical work undertaken

And I make this solemn declaration, as to the matter aforesaid, according to the law in this behalf made, and subject to the punishment by law provided for any wilfully false statement in any such declaration.

\_\_\_\_\_  
*Date*

Declared at \_\_\_\_\_  
*Place of declaration*

before me \_\_\_\_\_  
*Applicant's signature*

\_\_\_\_\_  
*Signature of Justice of the Peace*

**FORM B**      **FOR COMPLETION BY EMPLOYERS/SUPERVISORS OF GRADUATES OF APPROVED COURSES ONLY**

<b>STUDENT</b>	
Full name:	

<b>EMPLOYER/SUPERVISOR</b>	
I certify that the entries in this record will be signed by a registered dental technician, dental prosthetist or dentist. I am fully conversant with the requirements of the Board to provide the student named with the necessary work supervision. I have abided by the guidelines in technical work as set out in the TAFE syllabus.	
Student's name:	
Commenced work at my laboratory on:	<i>Date commenced work</i>
And <input type="checkbox"/> was still employed on:	<i>Date still employed</i>
Or <input type="checkbox"/> ceased employment on:	<i>or ceased employment</i>

<b>RECORD OF HOURS WORKED</b>			
<b>Total Hours</b>	<b>Laboratory</b>	<b>Student's Signature</b>	<b>Supervisor's Signature</b>

<b>LABORATORY DETAILS</b>	
Name of proprietor of laboratory:	
Name of laboratory:	
Address of laboratory:	
Telephone number of laboratory:	
Employer/Supervisor name:	
Employer/Supervisor signature:	
Date:	
Employer/Supervisor Registration Number:	

**PLEASE PHOTOCOPY THIS FORM [APPENDIX 4 – FORM B] IN THE EVENT OF MORE THAN ONE EMPLOYER.**

## APPLICATION FOR REGISTRATION AS A DENTAL TECHNICIAN

## CHARACTER REFERENCE

I, *Full name* \_\_\_\_\_  
of \_\_\_\_\_

\_\_\_\_\_ *Address*  
*Telephone* \_\_\_\_\_ (*W*) \_\_\_\_\_ (*H*)

\_\_\_\_\_ *Occupation* \_\_\_\_\_ *Category*  
\_\_\_\_\_ *number*

do sincerely declare that I have known \_\_\_\_\_  
*Full name of applicant for registration*

for \_\_\_\_\_ years, in the following capacity \_\_\_\_\_  
*Capacity in which the applicant for registration is known*

and that in my opinion this person is of good fame and character, and in that respect suitable for registration as a dental technician in accordance with the provisions of the Dental Technicians Registration Act 1975. I believe that I have sufficient knowledge of the applicant to form this opinion.

I have inquired from the applicant whether there has been any prior refusal to Register, prior deregistration or suspension from any Register, current complaints, claims for damages, expulsion from an academic institution, convictions or adverse findings of Courts or Royal Commissions with respect to the applicant, or any other matter that may reflect adversely on the applicant's good character. I have no concerns about the applicant's honesty and integrity, ability to maintain privacy and confidentiality, commitment to maintaining the reputation and standing of the profession, moral position to resist opportunity for exploitation (including sexual exploitation) or respect for the personal and religious beliefs of others.

\_\_\_\_\_  
*Referee's signature*

\_\_\_\_\_  
*Date*

**Categories**

1. Members of a profession which is regulated by an Act of Parliament in New South Wales or elsewhere, such as medical practitioners, dental technician, solicitors, architects.
2. Current employees of Commonwealth, State, and Territory governments (including Area Health Services and public hospitals) in Australia or other countries, who have been employed continuously for at least three years by their current employer.
3. Current serving members of Area Health Boards and Health Professional Boards (except the Dental Technicians Registration Board).
4. Currently employed teachers who have been teaching for more than three years at schools or tertiary institutions in Australia or another country.
5. Elected representatives in an Australian Parliament. (Commonwealth, State, or Territory)
6. Ministers of religion

**NOTES**

- *As a guide, this character reference should be dated within the last six months by someone who has known the applicant for 12 months or longer.*
- *Any information known to the referee which may reflect adversely on the applicant's character should be provided to the Board under separate cover.*
- *Character references from the applicant's immediate family are not acceptable.*

## APPLICATION FOR REGISTRATION AS A DENTAL TECHNICIAN

## CHARACTER REFERENCE

I, *Full name* \_\_\_\_\_  
of \_\_\_\_\_

\_\_\_\_\_ *Address*  
*Telephone* \_\_\_\_\_ (*W*) \_\_\_\_\_ (*H*)

\_\_\_\_\_ *Category*  
*Occupation* \_\_\_\_\_ *number*

do sincerely declare that I have  
known \_\_\_\_\_

\_\_\_\_\_ *Full name of applicant for registration*

for \_\_\_\_\_ years, in the following  
\_\_\_\_\_ capacity

\_\_\_\_\_ *Capacity in which the applicant for registration is known*

and that in my opinion this person is of good fame and character, and in that respect suitable for registration as a dental technician in accordance with the provisions of the Dental Technicians Registration Act 1975. I believe that I have sufficient knowledge of the applicant to form this opinion.

I have inquired from the applicant whether there has been any prior refusal to Register, prior deregistration or suspension from any Register, current complaints, claims for damages, expulsion from an academic institution, convictions or adverse findings of Courts or Royal Commissions with respect to the applicant, or any other matter that may reflect adversely on the applicant's good character. I have no concerns about the applicant's honesty and integrity, ability to maintain privacy and confidentiality, commitment to maintaining the reputation and standing of the profession, moral position to resist opportunity for exploitation (including sexual exploitation) or respect for the personal and religious beliefs of others.

\_\_\_\_\_ *Referee's signature*

\_\_\_\_\_ *Date*

**Categories**

1. Members of a profession which is regulated by an Act of Parliament in New South Wales or elsewhere, such as medical practitioners, dental technician, solicitors, architects.
2. Current employees of Commonwealth, State, and Territory governments (including Area Health Services and public hospitals) in Australia or other countries, who have been employed continuously for at least three years by their current employer.
3. Current serving members of Area Health Boards and Health Professional Boards (except the Dental Technicians Registration Board).
4. Currently employed teachers who have been teaching for more than three years at schools or tertiary institutions in Australia or another country.
5. Elected representatives in an Australian Parliament. (Commonwealth, State, or Territory)
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