



APPLICATION TO REQUEST EVALUATION OF CRIMINAL HISTORY

Fee: \$25.00

INSTRUCTIONS

- If you can answer “**NO**” to **ALL** of the questions asked in the Criminal History section of this application you **DO NOT** need to complete this application.
- This application should be submitted to determine if your criminal history will allow you to be eligible for licensure as a dentist, a dental hygienist, or registration as a dental assistant in Texas.
- If you can answer “**YES**” to **ANY** question asked in the Criminal History section of this application:
 - Enclose your non-refundable **\$25** cashier’s check or money order made payable to the Texas State Board of Dental Examiners (TSBDE).
 - Mail this application to the TSBDE at the address listed above.
 - Incomplete application packages will be returned to the applicant.
 - Texas law allows the agency 90 days to evaluate your materials, however, you will receive a response as quickly as possible.

DISCLOSURE OF CRIMINAL HISTORY OR DISCIPLINARY ACTIONS

- The TSBDE has determined that criminal behavior is highly relevant to an individual's fitness to practice dentistry, dental hygiene and dental assisting. Therefore, all criminal convictions or deferred orders, prosecution, or adjudication (a determination by a court that is withheld or delayed for a specific time period) must be reported to the TSBDE.
- This includes offenses under the law of another state, federal law, or the Uniform Code of Military Justice that contains elements of criminal conduct. Submit a signed and dated personal letter of explanation describing each offense and any rehabilitative efforts that have been performed since the order. In addition, submit certified copies of the following documentation for all felonies and for all misdemeanors:
 1. Charges (indictment, information, or complaint);
 2. Disposition of charges (Judgment, Order of Probation, Sentence, and/or Deferred orders); and
 3. Evidence that the conditions of the court have been met.

CHECKLIST

Use this checklist to ensure you submit a complete application package.

- _____ Have you provided your Full Name, Address, Phone Number, Social Security Number and Date of Birth?
- _____ Have you indicated whether you are seeking an evaluation for eligibility as a dentist, dental hygienist or registered dental assistant?
- _____ Have you prepared and signed a personal letter, addressed to the TSBDE, explaining the details of each offense? (Please be advised that if you withhold the details of any criminal history your application for licensure or registration will not be approved.)
- _____ Are you submitting certified copies of all applicable court documents including, but not limited to, indictments, orders of deferred adjudication, judgments, probation records, and evidence of completion of probation.
- _____ Have you enclosed the non-refundable fee of \$25 (cashier’s check or money order) made payable to the TSBDE?

FREQUENTLY ASKED QUESTIONS

If I do not have a criminal history do I need to complete this application? No. (You may exclude Class C Misdemeanor traffic violations)

What does “Certified” mean? Each page of every document submitted must be stamped with the court seal and certified by the court clerk as being a true and original copy of the court record. Copies or non-certified documents will not be accepted.

How do I get my copy of court documents certified? Contact the county clerk where your case was adjudicated and ask for instructions on how to obtain a copy of your record(s). Allow time for response to your request as some records go through a search and approval procedure before being released.

My lawyer has all the documents. Can I get them from her/him? Contact your attorney for assistance. Copies will still need to be certified by the court clerk as being true and original copies.

I don’t know the outcome of my criminal matter. Who do I talked to? Consult with your attorney if you have questions regarding the outcome of any criminal matter.

Where can I obtain a copy of my criminal history? A criminal history can be obtained from the Texas Department of Public Safety.

What Law applies to the Consequences of a Criminal Conviction? Texas Occupations Code Chapter 53, (Consequences of a Criminal Conviction), Subchapter B (Ineligibility for License).



APPLICATION TO REQUEST EVALUATION OF CRIMINAL HISTORY

Texas State Board of Dental Examiners

333 Guadalupe Street, Tower 3, Suite 800

Austin, TX 78701-3942

Phone: (512) 463-6400

Website: www.tsbde.texas.gov

APPLICATION FEE: \$25.00

Last Name: _____ First Name: _____ Middle Name: _____

Previous Names: _____

Phone Number: (____) _____ *Social Security #: _____ Date of Birth: ____/____/____
mm dd yyyy

Address: _____ E-Mail: _____

City: _____ State: _____ Zip Code: _____

* - The TSBDE requires an applicant to provide a SSN as a part of the licensure, certification or registration process. The SSN of an applicant for a license, certificate, or registration or other legal authorization issued by the TSBDE is confidential and not subject to disclosure under Chapter 552 of the Texas Government Code.

I request a evaluation of my criminal history to determine if I will be eligible for: (✓ Check One)

_____ Dental Licensure _____ Dental Hygiene Licensure _____ Registered Dental Assistant (RDA Certificate)

CRIMINAL HISTORY

If you answer "YES" to ANY of the questions listed below you must provide a signed and dated personal letter describing each offense and submit **certified** copies of all applicable court documents including, but not limited to, indictments, orders of deferred adjudication, judgments, probation records, and evidence of completion of probation. **(Note: You may exclude Class C Misdemeanor traffic violations)**

If you were ever required to register as a sex offender, you must answer "YES".

If you answer "NO" to ALL of the questions listed below do NOT complete this application.

For any criminal offense, including those pending appeal, have you:

- Yes No A. been convicted of a misdemeanor?
- Yes No B. been convicted of a felony?
- Yes No C. pled nolo contendere, no contest, or guilty to a felony or misdemeanor?
- Yes No D. received deferred adjudication for a felony or misdemeanor?
- Yes No E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?
- Yes No F. been sentenced to serve jail time or prison time or court-ordered confinement?
- Yes No G. been granted pre-trial diversion?
- Yes No H. been arrested or have any pending criminal charges?
- Yes No I. been cited or charged with any violation of the law?
- Yes No J. been subject of a court-martial; Article 15 violation; or received any form of military judgment, punishment or action?

NOTE: EXPUNGED AND SEALED OFFENSES: While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Non-disclosure of relevant offenses raises questions related to truthfulness and character.

NOTE: ORDERS OF NON-DISCLOSURE: Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are subject to an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code Chapter 411, the TSBDE is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the TSBDE discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the TSBDE may require you to provide information about any conduct that raises issues of character.

ATTESTATION

I, the Petitioner referred in this application, acknowledge this document is a legal document and I attest that the statements herein contained are true in every respect. I understand that no one else may submit this form on my behalf and that I am accountable and responsible for the accuracy of any answer or statement on this form.

Further, I understand that it is a violation of the Penal Code, Sec 37.10, to submit a false statement to a government agency; and

I consent to release of confidential information to the Texas State Board of Dental Examiners (TSBDE) and further authorize the TSBDE to use and to release said information as needed for the evaluation and disposition of my application.

I understand that if I have any questions regarding this affidavit I should contact an attorney or the appropriate professional health provider.

I will immediately notify the TSBDE if at any time after signing this affidavit I no longer meet the eligibility requirements.

Applicant's Signature _____ Date: ____/____/____