



Criminal History Evaluation (CHE) Application

Texas State Board of Dental Examiners

1801 Congress Avenue, Suite 8.600
Austin, Texas 78701

Phone: (512) 463-6400 | Fax: (512) 649-1658

E-Mail: Licensinghelp@tsbde.texas.gov

Instructions: 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. An incomplete application 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.

FEE IS

\$25

Check or Money Order

Legal Last Name	Legal First Name	Legal Middle Name	
Previous Names			
Social Security Number*	Date of Birth <small>MM / DD / YYYY</small>	Phone Number	
Current Address	City	State	Zip
Email Address			
<small>* Pursuant to Sec. 59.001 of the Dental Practice Act, the social security number of an applicant for or holder of a license, or registration, or other legal authorization issued by a licensing agency to practice in a specific occupation or profession that is provided to the licensing agency is confidential and not subject to disclosure under Chapter 552, Government Code.</small>			
I am requesting an evaluation of my criminal history to determine if I will be eligible for a: (✓) Check One <input type="checkbox"/> Dental Licensure <input type="checkbox"/> Dental Hygiene Licensure <input type="checkbox"/> Registered Dental Assistant			

CRIMINAL HISTORY: "YES" to ANY of the questions listed below REQUIRE you TO 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.

1. Have you ever had any application for any professional license, registration, certification, or permit refused or denied by any licensing authority or government agency?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2. Have you ever had a professional license, registration, certification, or permit revoked, suspended, or canceled, by any licensing authority or government agency, or voluntarily surrendered?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
3. Have you ever been the subject of disciplinary action by any licensing authority or government agency with regard to any professional license, registration, certification, or permit?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

<p>4. For any criminal offense, including those pending appeal, have you ever:</p> <p>A. been convicted of a misdemeanor (other than minor traffic violations)?</p> <p>B. been convicted of a felony?</p> <p>C. pled nolo contendere, no contest, or guilty?</p> <p>D. received deferred adjudication?</p> <p>E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?</p> <p>F. been sentenced to serve jail or prison time? court-ordered confinement?</p> <p>G. been granted pre-trial diversion?</p> <p>H. been arrested or have any pending criminal charges?</p> <p>I. been cited or charged with any violation of the law?</p> <p>J. been subject of a court-martial; Article 15 violation; or received any form of military judgement/punishment/action?</p> <p>If YES, in addition to the affidavit, attach a certified copy of the court records regarding your conviction, the nature of the offense, date of discharge, if applicable, as well as a statement from the probation or parole officer. Also, provide a copy of an Order of Non-Disclosure or the Court Order expunging or sealing (non-disclosure) any conviction, offense, arrest, or citation.</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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<p>5. Are you currently suffering from any condition for which you are not being appropriately treated that impairs your judgement or that would otherwise adversely affect your ability to practice in a competent, ethical, and professional manner?</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Important: The Board recognizes that licensees encounter health conditions, including those involving mental health and substance use disorders, just as their patients and other health care providers do. The Board expects its licensee to address their health concerns and ensure patient safety. Options include seeking independent medical care, self-limiting the licensee’s practice, and/or anonymously self-referring to the Professional Recovery Network (PRN). The PRN (<http://www.txpm.com/>) is supported in part by your license fees and is a peer assistance program dedicated to helping health care professionals enter a safe, health recovery in a confidential manner. The failure to adequately address health condition, where the licensee is unable to practice with reasonable skill and safety to patients, can result in the Board taking action against the license to practice.

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.

<p>ATTESTATION</p>
<p>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.</p> <p>Further, I understand that it is a violation of the Texas Administrative Code and the Penal Code 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.</p> <p>Applicant’s Signature _____ Date: ____ / ____ / ____</p>

Checklist – Use the checklist below to ensure you submit a complete application package. Incomplete application packages will be returned.

_____ 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.)

_____ Have you submitted **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?

Once the completed application has been received, staff will email the instructions on scheduling a fingerprint session with IdentoGO. Once the applicant has completed their fingerprint session, the applicant will need to email a copy of their fingerprint receipt to Licensinghelp@tsbde.texas.gov and include their full name and date of birth.

Disclosure of Criminal History or Disciplinary Action(s)

- 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 arrests, 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.

Frequently Asked Questions (FAQs)

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 talk 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).