Application form for admission to examination held under the provisions of Section 27 (2) (d) of the Dentists Act 1985.

Dental Council
57 Merrion Square
Dublin 2

Application form for admission to examination held under the provisions of Section 27 (2) (d) of the Dentists Act 1985.

Please write in BLOCK CAPITALS

Family Name/Surname

1. 

Personal/First Name

Address:

E-Mail Address:

Place of Birth:________________________ Date of Birth:□□/□□/□□□□

Nationality:________________________

Gender: Female □  Male □
2. EDUCATION RECORD

<table>
<thead>
<tr>
<th>Institution</th>
<th>Dates</th>
<th>Qualifications Obtained with dates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>From</td>
<td>To</td>
</tr>
<tr>
<td>University</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postgraduate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. **PROFESSIONAL EXPERIENCE**  *(from date of graduation up to date)*

<table>
<thead>
<tr>
<th>Grade or Title of Post if relevant</th>
<th>Dates</th>
<th>Type of Dental Practice and Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 4. REGISTRATION RECORD

<table>
<thead>
<tr>
<th>Registering Authority</th>
<th>Address</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>From</td>
</tr>
</tbody>
</table>
5. Have you ever taken or applied to take the Irish Dental Council Examination for non-EEA trained dentists? (PLEASE CIRCLE): YES / NO

If you have answered yes, please specify in which year: _______________________

6. Do you currently hold a temporary registration post or have you applied for temporary registration, in Ireland? (PLEASE CIRCLE): YES / NO

If you have answered yes, please provide more detail: _______________________

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

7. I confirm that I have attached a copy of my passport (PLEASE CIRCLE): YES / NO

8. I declare that the foregoing particulars are correct, and I hereby apply for admission to the examination.

If you have answered yes, please specify in which year: _______________________

Date: __________________ Signature: ______________________________