An Chomhairle Fiacloireachta
Dental Council

Register of Dental Specialists

Information Leaflet

and

Application Form

57 MERRION SQUARE
DUBLIN 2
INFORMATION
1. **DENTISTS ACT 1985**

The Register of Dental Specialists was established under the provisions of Section 29 of the Dentists Act 1985.

2. **RECOGNISED SPECIALTIES**

The Register of Dental Specialists contains a division in respect of

(a) Oral Surgery  
(b) Orthodontics

3. **REGISTRATION**

a) To be eligible for registration in the Register of Dental Specialists a dentist must be fully registered in the Register of Dentists.

b) Subject to the provisions of the Dentists Act 1985 the following persons are entitled to registration in the Register of Dental Specialists:

   - every registered dentist who prior to the establishment of the Register, has, in the opinion of the Council, completed his/her training in a recognised specialty.
   - every registered dentist who, following the establishment of the Register, is granted evidence of satisfactory completion of specialist training in a recognised specialty by a body recognised by the Council under Section 37 of the Act.
   - every registered dentist who being a national of a Member State has been awarded in a Member State a qualification in a dental specialty recognised by the Council which pursuant to the provisions of any Directive adopted by the Council of the European Communities the State is obliged to recognise.
   - any registered dentist who satisfies the Council that he/she has completed a programme of training in specialised dentistry of a standard considered by the Council to be adequate.
   - A suitably qualified dentist may have his/her name entered in more than one division of the Register of Dental Specialists.

4. **APPLICATIONS**

Please see the Dental Council website [www.dentalcouncil.ie](http://www.dentalcouncil.ie) for details of the information that must be submitted in support of your application for specialist registration.

5. **FEES**

The fee for initial registration in the Register of Dental Specialists is €220.00 and an annual fee of €220.00 is payable thereafter for the retention of the dentist’s name in the Register of Dental Specialists. These fees may be amended from time to time by the Council with the consent of the Minister for Health and Children.
**REGISTRATION IN THE REGISTER OF DENTAL SPECIALISTS**

<table>
<thead>
<tr>
<th>Surname</th>
<th>___________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Type or Block Capitals)</td>
<td></td>
</tr>
<tr>
<td>Forenames</td>
<td>___________________________</td>
</tr>
<tr>
<td>(Type or Block Capitals)</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>___________________________</td>
</tr>
<tr>
<td>(Type or Block Capitals)</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td>___________________________</td>
</tr>
</tbody>
</table>

| Registration Number in the Register of Dentists | ________________________ |
| What divisions of the Register are you applying for? | ________________________ |
| (Oral Surgery and/or Orthodontics)              |                             |

**Declaration**

I hereby declare that:

the above information and the documentation which I furnish in support of my application and upon which I am relying is true and accurate to the best of my knowledge and belief.

I acknowledge that the granting of registration in the Register of Dental Specialists is at the discretion of the Dental Council under the provisions of the Dentists Act 1985.

I consent and give authority to the Dental Council to make any inquiry with any body or person in pursuance to my application for registration in the Register of Dental Specialists;

Signed: ___________________________  Date: ___________________________

Completed application forms and supporting documentation should be forwarded to:

THE REGISTRATION DEPARTMENT, DENTAL COUNCIL, 57 MERRION SQUARE, DUBLIN 2.

**NOTE**

*It is an offence under Section 67 of the Dentists Act 1985 to make any false declaration or misrepresentation for the purpose of obtaining registration in any register maintained by the Council under the Act or to aid and abet the making of such false declaration or misrepresentation.*
## SPECIALIST TRAINING DETAILS

<table>
<thead>
<tr>
<th>Duration</th>
<th>Training Institution</th>
<th>Qualifications Obtained</th>
</tr>
</thead>
<tbody>
<tr>
<td>From</td>
<td>To</td>
<td></td>
</tr>
</tbody>
</table>

If training was other than full-time please give details: __________________________

____________________________
____________________________
____________________________
____________________________

Signed: ______________________ Date: ______________________