



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



Dental License Request for Letter of License Certification

For Office Use Only:

Receipt No.: _____
Fee Paid: \$ _____
Completed by: _____
Date Mailed: _____

\$50.00 FEE REQUIRED PER LETTER REQUESTED
FEE IS NON-REFUNDABLE AND NON-TRANSFERABLE

Make check or money order payable to: Dental Board of California.

Allow 30 days for processing.

PLEASE TYPE OR PRINT CLEARLY IN INK. Be sure to provide all information requested.

Related permits will be included and do not need to be requested separately.

Form with fields for License Type (DDS, OMS, SP), License No., Last, First, (Full) Middle, Email Address, and Telephone Number.

ADDRESS WHERE LETTER OF CERTIFICATION IS TO BE SENT (Mail Only):

Form with fields for Name or Agency, Address, City, State, and Zip Code.

DECLARATION: I authorize the Dental Board of California to send a certification of my California dental license to the address above.

Signature Date:

Complete this section only if you qualified for licensure by passing the Clinical Dental Licensure Examination administered by the Dental Board of California prior to January 1, 2010, and would like certification of your examination scores included.

Examination scores cannot be provided if you qualified for licensure by passing the WREB, ADEX, or CDCA-WREB-CITA examinations. For scores or additional information please contact the testing agency directly.

Form with fields for Full Name, Exam Date, and CA Dental School Where Exam Was Taken.

DECLARATION: I authorize the Dental Board of California to disclose the scores from my California dental license examination to the address above.

Signature Date:

INFORMATION COLLECTION AND ACCESS

This completed form, including all applicable fees, must be submitted to the Dental Board of California (Board) as required by Title 16, California Code of Regulations (16 CCR) sections 1021 or your application will not be processed (16 CCR section 1004). The information requested on this form is mandatory and will be used to determine eligibility for issuance of a license certification. The information may be provided to other governmental agencies, or in response to a court order, subpoena, or public records request. You have a right of access to records containing personal information unless the records are exempted from disclosure pursuant to Civil Code section 1798.40. Individuals may obtain information regarding the location of their records by contacting the Board's Executive Officer at 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, Executive Officer, 916-263-2300.