INFORMATION REGARDING LICENSURE BY CREDENTIALS
(Dentist or Dental Hygienist)

Thank you for your interest in Licensure by Credentials in the State of Alabama. The requirements for this method of licensure are listed in the Code of Alabama (1975) §34-9-10 and the Alabama Administrative Code 270-X-2.19 (administrative code enclosed). Please carefully review these requirements to insure you are eligible for this type of license.

The application process for this type of license requires two applications. The first application must be submitted to Professional Background Information Services (PBIS) for the purpose of a Level II background verification. PBIS will bill you an initial fee for this service (Note that some surcharges could be added by PBIS). Payment must be made directly to PBIS.

To obtain the PBIS application, call or by visit their website:

PBIS
23460 N. 19th Ave., Suite 225
Phoenix, AZ 85027
Phone: (602) 861-5867
www.pbisonline.com
Fax: (602) 861-9656

Due to the detailed nature of the background verification, it may take 45 to 90 days for PBIS to request and receive all the required documentation. When PBIS concludes their background verification, the application will be forwarded to the Board and you will be notified. Prior to that notification, any questions regarding the status of the PBIS’s background verification should be directed to PBIS.

The second application (below) is submitted directly to the Board. The fee for applying for Licensure by Credentials is $2,200.00 for a dentist and $1,100.00 for a dental hygienist. The fees to the Board and PBIS must be received before the application process can begin. These fees are non-refundable.

A citizenship verification form will accompany the second application and will also, be submitted directly to the Board. In accordance with Code of Alabama (1975) §34-9-10, any applicant for licensure must be a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government and must have received his/her dental or dental hygiene education in a CODA accredited school.

Lastly, applicants must successfully pass a written jurisprudence examination which will be sent to you after your application has been approved.

If you have any questions about the procedure for obtaining Licensure by Credential, please call the Board’s office at (205) 985-7267 and ask to speak with the licensing clerk.
APPLICATION-LICENSURE BY CREDENTIALS

DENTAL__________   HYGIENE__________

NAME

SOCIAL SECURITY NUMBER_________________________ BIRTHDATE __________________________

CURRENT HOME ADDRESS ________________________________________________________

EMAIL ____________________________________________________

PHONE NUMBER (Best contact number) ________________________________________________

CURRENT BUSINESS ADDRESS ______________________________________________________

CURRENT BUSINESS PHONE ________________________________________________________

I have included the required Declaration of Citizenship and Legal Residence form*: YES NO
(*Leavethelicense/permitnumberfieldblankontheform)

If you are applying for DENTAL LICENSE:
Have you ever practiced General Anesthesia or Parenteral Sedation? Yes_ No_

If you answered "Yes," list on a separate sheet all instances of morbidity or mortality that have occurred in connection with your use of general anesthesia and/or parenteral sedation. Include a detailed explanation of any such occurrences.

DENTISTS ONLY: Will you be employed by any other person or entity? Yes_________ No___________  If “yes,” state the name of the employer as shown on the Alabama Secretary of State’s website, whether the employer is owned in part by an Alabama-licensed dentist, and the name(s) of the dentist-owner(s).

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The PBIS application and background verification is a necessary part of the process of applying for licensure by credentials and therefore the PBIS application is considered a part of this application. I understand and affirm that by signing this application I am representing to the Board that all the information supplied to PBIS and or included is true and correct as evidenced by the notary requirements below.
STATE OF ____________________
COUNTY OF ____________________

__________, being duly sworn by me on his/her oath that all facts, statements and answers contained in this application are true and correct in every respect, and that the attached photograph is a true likeness of the applicant.

Subscribed and sworn to before me this _______ day of _______ 20____. Witness my hand and seal hereunto attached.

__________________________________________
Notary Signature
My commission Expires ________________________
Alabama Board of Dental Examiners
Administrative Code (Board Rules)

270-X-2.19: Licensure by Credentials.

(1) Definitions: The following definitions shall apply to these rules:

(a) LICENSURE BY CREDENTIALS. Licensure by credentials is to be used to evaluate the theoretical knowledge and clinical skill of a dentist/dental hygienist when an applicant holds a dental/dental hygienist license in another state,

(b) BOARD. Board shall mean the Board of Dental Examiners of Alabama.

(c) ACT. Code of Alabama (1975), § 34-9-1 et seq.

(2) To be eligible for licensure by credentials in the State of Alabama, the applicant shall meet the provisions of Code of Alabama (1975), § 34-9-10 and this Rule, which are as follows:

(a) The dentist/dental hygienist must have been engaged in the active practice of clinical dentistry/clinical dental hygiene or in full time dental/dental hygiene education for the five (5) years or five thousand (5,000) hours immediately preceding their application.

(b) The applicant must hold a current, valid, unrevoked, and unexpired license in a state having examination standards regarded by the Board of Dental Examiners of Alabama as an equivalent to the Alabama standards. For purposes of this requirement, these exam standards shall include passing the National Dental Board Examination Parts 1 and 2 administered by the Joint Commission on National Dental Examinations.

(c) The Board of Examiners in the state of current practice shall verify or endorse that the applicant’s license is in good standing without any restrictions.

(d) The dentist/dental hygienist must not be the subject of a pending disciplinary action in any state in which the individual has been licensed which shall be verified through inquiry to the National Practitioner Data Bank, the health Integrity Protection Data Bank, the American Association of Dental Boards Clearing House for Disciplinary Information, or any other pertinent Bank currently existing or which may exist in the future.

(e) The applicant shall provide a written statement agreeing to be interviewed at the request of the Board.

(f) The applicant must successfully pass a written jurisprudence examination.

(g) There shall be certification from the United States Drug Enforcement Administration (DEA) and from the State board of any state in which the applicant is or has been licensed that the DEA registration is not the subject of any pending disciplinary action or enforcement of any kind, or that any state controlled substances permit has not been revoked, suspended, modified restricted or limited in any way.

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(h) The applicant must submit affidavits from two (2) licensed dentists/dental hygienists practicing in the same geographical area where the applicant currently is practicing or teaching attesting to the applicant’s moral character, standing, and ability.

(i) The applicant must provide the Board with and official transcript with school seal from the school of dentistry/dental hygiene which issued the applicant’s professional degree or execute a request and authorization allowing the board to obtain the transcript.

(j) The applicant must be a graduate of a dental/dental hygiene school, college or educational program approved by the board.

(k) The applicant must not be the subject of any pending or final action from any hospital revoking, suspending, limiting, modifying, or interfering with any clinical or staff privileges.

(l) The applicant must not have been convicted of a felony or any misdemeanor involving moral turpitude or of any law dealing with the administering or dispensing of legend drugs, including controlled substances.

(m) The Board may consider or require other criteria including, but not limited to, any of the following:

   (i) Questioning.

   (ii) Results of peer review reports from constituent dental societies or federal dental services.

   (iii) Substance abuse testing or treatment.

   (iv) Background checks for criminal or fraudulent activities.

   (v) Participation in continuing education.

   (vi) A current certificate in cardiopulmonary resuscitation.

   (vii) Recent case reports or oral defense of diagnosis and treatment plans.

   (viii) Proof of no physical or psychological impairment that would adversely affect the ability to practice dentistry/dental hygiene with reasonable skill and safety.

   (ix) Proof of professional liability coverage and that coverage has not been refused, declined, cancelled, non-renewed, or modified.

   (x) Whether the applicant has been subject to any final disciplinary action in any state in which the individual has been licensed which shall be verified by a query in the National Practitioner Data Bank, the Health Integrity Protection Databank, the American Association of Dental Examiners Clearing House for Disciplinary Information, any state where the applicant has been licensed, or any other pertinent bank currently existing or which may exist in the future.
Whether the applicant’s DEA registration or any state controlled substances permit has ever been revoked, suspended, modified, restricted, or limited in any way. Provided, however, that any discipline that results only from a failure to timely renew a registration or permit shall not prevent an applicant from being eligible for this method of licensure.

Denial of any professional license or denial of the opportunity to take a dental/dental hygiene exam.

If all criteria and requirements are satisfied and the Board determines, after notice and hearing, that the individual committed fraud or in any way falsified any information in the application process, the Board may impose disciplinary sanctions allowed by the provisions of the Act.

In addition to the requirements for applicants seeking licensure by credentials, an applicant desiring to practice a specialty only, must meet the following requirements:

(a) The specialty must be one in a branch of dentistry approved by the American Dental Association.

(b) The applicant shall meet the existing educational requirements, and standards set forth by the American Dental Association for that approved specialty.

(c) An applicant who chooses to announce or practice a specialty must limit his/her practice exclusively to the announced special area or areas of dental practice.

An applicant shall submit to the board with the application, a non-refundable fee to be determined by the Board. If an applicant is granted a license, this fee includes the licensing fee for the remaining portion of the first licensing year.

Regardless of the applicant’s compliance with the foregoing requirements, the Board may refuse to issue a license by credentials based on any conduct which would be a ground for discipline pursuant to Code of Alabama (1975), § 34-9-19.

An applicant granted a license by credentialing will be subject to the Act and all Board rules.
