

# Equivalency Process

## Alternative Documentation Submission Request Form



NDEB  
80 Elgin Street  
2nd Floor  
Ottawa, Ontario,  
Canada K1P 6R2

Applicants who are unable to submit Required Documents due to circumstances beyond their control may use the NDEB Alternative Documentation Submission Process. The NDEB will consider the evidence submitted on a case by case basis and provide reasons for any decision.

Be advised that the accredited Qualifying and Degree Completion Programs have their own admission criteria and approval to the NDEB Equivalency Process does not guarantee acceptance to an accredited Qualifying or Degree Completion Program.

Type or print the following information clearly.

NDEB Identification Number: 

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Name of Applicant: Dr. \_\_\_\_\_, \_\_\_\_\_  
(Surname) (Given Name(s))

Post-Secondary Institution: \_\_\_\_\_

Dental Degree Awarded: \_\_\_\_\_ Date Awarded: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Instructions

1. Complete an online application and pay the application fee
2. Submit all available required documents from the *Required Documents*
3. Submit the documents listed below. Failure to submit any of these documents may delay the process of approval of your application.
  - Original sworn affidavit attesting to the circumstances preventing you from submitting all required documents. The affidavit must include:
    - o your identity
    - o the reasons why you cannot submit the required documents
    - o the attempts made to obtain the documents
    - o the name of the university you attended
    - o name and description of all courses taken if no academic record is available
    - o the dates you attended and completed your dental program
    - o the name of the degree granted and the date it was granted
  - Notarized photocopy of proof of refugee or protected person status in Canada, if applicable
  - Notarized photocopy of your student identification
  - Notarized photocopies of any academic records in your possession.
  - Original witness statements from Faculty members, University officials, colleagues, or employers attesting that you have graduated from a dental program. A photocopy of the author's passport must be attached to the letter
  - Original letters confirming you have completed a compulsory internship, if required for graduation
  - Notarized photocopies of all dental licenses for the past 5 years, if applicable
  - Notarized documentation of attendance at Continuing Education Courses for the past 3 years, if applicable

I, \_\_\_\_\_ declare that I am not able to provide the NDEB with the following required documents because of circumstance beyond my control. I understand that the NDEB may request additional documentation.

- Confirmation of Degree Form (directly from the university that issued your final dental degree)
- Academic Record (directly from the university that issued your final dental degree)
- Dental degree
- Internship Completion Certificate (if required)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date