



RECRUITMENT NOTICE

REGISTERED DENTAL ASSISTANT IN EXTENDED FUNCTIONS (RDAEF)

DENTAL ASSISTING COUNCIL OF THE DENTAL BOARD OF CALIFORNIA

The Dental Board of California (Board) established a seven member Dental Assisting Council (DAC) which considers all matters relating to dental assistants in California and makes appropriate recommendations to the Board and the standing Committees of the Board. The initial term of the Registered Dental Assistant in Extended Functions (RDAEF) member expired in March 2016.

The Board is now accepting applications from qualified RDAEFs to fill this vacancy.

The candidate is required to have possessed a current and active RDAEF license for at least the prior five years; and to be employed clinically in a private dental practice or public safety net or dental health care clinic, and shall have been so employed for at least the prior five years. The candidate shall not be employed by a current member of the Dental Board, shall not have served on the Dental Assisting Forum and shall not have any financial interest in any Registered Dental Assistant school. Please refer to the application for any additional qualification requirements.

This position is not full time paid employment. Members meet quarterly and at other times as deemed necessary; and are reimbursed for meals, transportation and lodging as necessary at the state rate; plus \$100/day per diem.

If you are interested, please complete the application and return it along with a cover letter and résumé to the Dental Board. The application process will remain open until the position is filled.

The application can be found on the Board's website at www.dbc.ca.gov

If you have any questions, please do not hesitate to contact Linda Byers at 916-263-2212 or linda.byers@dca.ca.gov

Thank you for your interest.



APPLICATION FOR APPOINTMENT TO THE DENTAL ASSISTING COUNCIL

PLEASE PRINT

NAME _____

ADDRESS* _____

PHONE NOS. (work) _____ (home) _____ (cell) _____

EMAIL ADDRESS: _____

California License Type and Number: _____ Expiration date: _____

** By law, all final candidate applications must be made available to the public in the published board materials. Applicants may provide alternate addresses or addresses of record in lieu of residential addresses. Phone numbers will be redacted prior to publication in Board meeting materials to protect an applicant's privacy.*

PLEASE READ THIS APPLICATION IN ITS ENTIRETY.

COUNCIL COMPOSITION: The Dental Assisting Council is a seven member council created pursuant to Section 1742 of the Business and Professions Code. The members of the Council are appointed by the Board and shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

RESPONSIBILITIES: The Council is to consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing committees of the Board including, but not limited to, the following areas:

- Requirements for dental assistant examination, licensure, permitting, and renewal.
- Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- Allowable dental assistant duties, settings, and supervision levels.
- Appropriate standards of conduct and enforcement for dental assistants.
- Requirements regarding infection control.

QUALIFICATIONS:

This recruitment is specifically for a registered dental assistant in extended functions who is employed clinically in private dental practice or public safety net or dental health care clinic and has possessed a current and active registered dental assistant in extended functions license for at least five years. The candidate cannot be employed by a current member of the Board.

No council appointee shall have served previously on the dental assisting forum or have any financial interest in any registered dental assistant school. Each member shall comply with conflict of interest requirements that apply to Dental Board members. Such requirements include prohibitions against members making, participating in making or in any way attempting to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any council member who has a financial interest shall disqualify him or herself from making or attempting to use his or her official position to influence the decision. (Gov. Code, § 87100.)

All final candidate qualifications and applications for Board-appointed council members shall be made available in the published Board materials with final candidate selection conducted during the normal business of the Board during public meetings.

TERM OF OFFICE: Each member shall serve not more than two four year terms.

TRAVEL: The Council will meet approximately four times per year in conjunction with other board committees, and at other times as deemed necessary. Expenses incurred in the performance of official duties are reimbursed by the Dental Board of California in accordance with the Pocket Travel Guide published by the Office of Administrative Services, Accounts Payable Unit of the Department of Consumer Affairs. Council members receive \$100 for each day actually spent in the discharge of official duties, as determined by the Board (Business and Professions Code section 103).

OTHER TIME COMMITMENTS: Council members shall be required to participate in Ethics Orientation, Sexual Harassment Prevention Training and Board Member Orientation Training, and prepare and submit a financial disclosure statement that is filed with the Fair Political Practices Committee entitled "Form 700, Statement of Economic Interests."

In order to assist the Board in determining eligibility for appointment to the Council, please answer the following questions:

1. Have you received a recommendation from any incorporated, nonprofit professional society, association, or entity whose membership is comprised of registered dental assistants within the state? If so please, please indicate which organization in the space below and provide a copy of such recommendation with this application.

Access to Your Information. You may review the records maintained by the Board that contain your personal information, as permitted by the Information Practices Act (Civ.Code, §§1798 et seq.). See below for contact information.

Possible Disclosure of Personal Information.

We make every effort to protect the personal information you provide us. In order to evaluate and verify your application information, however, we may need to share the information you give us with businesses or organizations you have referenced in your application.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant; or,
- In Board meeting materials, if selected as a final candidate for appointment (Bus.&Prof.Code, § 1742(c)).

Contact Information. For questions about this application, the Department’s privacy policy, or access to your records, you may contact the Board’s Executive Officer at the address and telephone number listed below.

I HAVE READ THIS APPLICATION AND HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT. I UNDERSTAND THAT IF I AM SELECTED FOR APPOINTMENT I MUST EXECUTE AN OATH OF OFFICE AND WILL BE REQUIRED TO ABIDE BY THE LAWS AND RULES APPLICABLE TO OFFICERS OF THE STATE OF CALIFORNIA.

Signature _____ Date _____

SUBMIT COVER LETTER, COMPLETED APPLICATION, RESUME, AND REFERENCES TO:

Karen M. Fischer, MPA, Executive Officer
Dental Board of California
2005 Evergreen Street, Suite 1550
Sacramento, CA 95815
(916) 263-2300