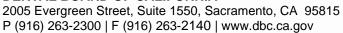


## STATE AND CONSUMER SERVICES AGENCY . GOVERNOR EDMUND G. BROWN JR

## **DENTAL BOARD OF CALIFORNIA**





## APPLICATION FOR SUBJECT MATTER EXPERT AND/OR SITE EVALUATOR

The Dental Board of California (Board) is seeking qualified experts and evaluators to assist the Board with reviewing and approving dental assisting educational program applications. Experts and evaluators will be expected to develop opinions, review program materials, prepare written recommendations, and possibly testify as an Expert Witness on behalf of the Board. An expert or evaluator must hold a current, active, and unrestricted license. Please see other recommended qualifications at the Board's website at www.dbc.ca.gov.

Subject matter expert and site evaluator positions for the Board are "at will" contract positions, meaning the Board may terminate the contracts at any time without notice and without cause.

Please complete each section and attach your curriculum vitae/resume with your submission of the application to the Board.

Legal Name:	Last	First	Middle	
List any other names u	sed:			
Mailing Address:	Street	City	State Zip	
Telephone Numbers (include area code):	Home	Work	Cell	
E-mail Address:				
Position(s) you are app	lying for (check all that apply):			
Subject Matte	r Expert	Site Evaluator		
List all current license(s	s) or permit(s) held:		License #:	
Please indicate the state	tus of your license:			
Active		Currently practicing		
☐ Inactive		Retired (If "Retired," indicate the year you retired)		

Have you ever had any disciplinary action taken or charges filed against your RDA license or other health-related license by a government agency? (Include copies of all documents relating to this action)	Yes	☐ No				
"License" includes permits, registrations, and certificates. Include any disciplinary actions taken by this agency, any other state agency, any U.S. territory, the U.S. Military, U.S. Public Health Service or other U.S. federal governmental entity. Disciplinary action includes, but is not limited to, suspension, revocation, probation, confidential discipline, consent order, letter of reprimand or warning, or any other restriction or action taken against a dental- or health-related license that was issued to you.						
Have you ever surrendered an RDA license, either voluntarily or otherwise?						
If "Yes," please provide a detailed explanation of the circumstances, and a copy of all documents relating to the surrender.	Yes	∐ No				
Have you been convicted or plead guilty to any crime in any state, U.S. territory, military court or foreign country?	Yes	☐ No				
"Conviction" includes a plea of no contest and any conviction that has been set aside or deferred pursuant to Sections 1000 or 1203.4 of the Penal Code, including infractions, misdemeanors, and felonies.						
You do not need to report traffic infractions with a fine of less than \$1,000 unless the infraction involved alcohol or controlled substances. You must, however, disclose any convictions in which you entered a plea of no contest and any convictions that were subsequently set aside or deferred pursuant to Sections 1000 or 1203.4 of the Penal Code.						
If you answer "Yes," please provide the following information to assist in the processing of your application:  1) Certified copies of the arresting agency report; 2) Certified copies of court documents; and 3) A descriptive explanation of the circumstances surrounding the conviction (i.e., dates and location of the incident(s), and all circumstances surrounding the incident(s)). If documents were purged by the arresting agency or court, a letter of explanation from these agencies is required to complete the processing of your application.						
Educational background (begin with college level):						
	of Study					
Please indicate which of the following area(s) you will be available for site visit participation:						
□ Bakersfield   □ Los Angeles   □ San Diego   □ Santa Maria						
☐ Chico       ☐ Modesto       ☐ San Francisco       ☐ Stockton         ☐ Freepo       ☐ Sacramento       ☐ San Jose       ☐ Visalia						
Fresno Sacramento San Jose Visalia						

Clinical Practice Experience:							
Name of DDS, City and State	Type of Practice	Position Held		From (yr)	To (yr)		
Teaching Appointments (begin with currer	nt assignment):						
Name of Institution, City and State	Position	Subjects Taught/Adm	nin Responsibilities	From (yr)	To (yr)		
Professional Development – In addition to		ease indicate all areas	of professional develo	pment you h	ave		
earned. Provide copies of certificates as ev	T						
2-Hour Teaching Methodology	☐ 30-hour Educatio		☐ CPR (AHA/ARC)	– BLS-C leve			
Courses (one or multiple subjects)	Methodology Certification – RDA						
☐ Pit & Fissure Sealant Certification	0/		☐ DANB Certification – CDA, COMSA,				
	Methodology Certification – RDAEF		CDPMA				
Curriculum Development – List all areas of	EDDA aducation for whi	ch you have written cu	rriculum contont		<u> </u>		
-		ch you have written cu					
Subject Area	Type of Program		Length of Course				
				<u> </u>			
As an educator, have you participated in ar	n accreditation/site visit	process? (please ched	ck)	☐ Yes	□ No		
Previous Consultant or Expert Witness Experience (begin with current assignment):							
Name of School, Board, Company You Provided Services For Type of Experience From (yr)			To (yr)				
				1			

References – List two professional references with whom you've worked.				
May we contact the references listed below	for verification?	☐ Yes ☐ No		
Name	Address	Telephone Number		
The Board uses experts and site evaluate	ors to evaluate educational curriculum su	bmitted by applicants who wish to		
become approved for one or more of th	e following: RDA Educational Program, R	DAEF Educational Program, Radiation		
Safety Course, Coronal Polishing Course	, Pit and Fissure Sealant Course, Ultrason	ic Scaling Course, Dental Sedation		
Assistant Course, and Orthodontic Assist	tant Course. Using the space below, sum	marize the qualifications and skills you		
believe you possess that would demonst	trate your ability to serve as a Subject Ma	itter Expert and/or Site Evaluator.		
-				
Matter Expert and/or Site Evaluator. I c	read the qualifications and requirements ertify under penalty of perjury under the lompanying documentation are true and co	aws of the State of California that the		
Applicant Signature		Date		
(For office use only)				