THE DENTAL COUNCIL OF HONG KONG

Application for Restoration to the General Register under Section 27A of the Dentists Registration Ordinance

My name	was removed from (Date) –	the follow	wing	part	of the	General	Register	on
(ii) Pa	rt 1 (Full Registration) rt 3 (Limited Registration rt 5 (Special Registration)	*						
Ordinance, Cap. 15	ne Dental Council of Ho 6, Laws of Hong Kong th the issue of a practisi	for the resto	ration	of m	y name to	o the origi	_	
*I wish to ha	ave my name be containe	ed in :						
` —	actising List of the Gene on-practising List of the	_						
*For persons applyabove where approp	ing for restoring to Part oriate.	t 1 (Full Regi	stratio	on), pl	ease indi	cate your	wish in the	box
Details of my person	nal particulars are set ou	it below.						
Personal Particula	<u>rs</u>							
Full Name (Must match name in HKID /Passport)	(Family name)	(Given r	ame)		in Chines	e (if any)		
HKID Card No.								
Passport No. (If no HKID)				Place	of Issue			
Registration Number (Before removal)			1					
Type o Registration	f Full Registration	n 🗌 Limite	ed Reg	gistrati	on 🗌	Special R	egistration	
Tel. No.	(country code) (area	/ code)						
Fax No.	(country code) (area	/ code)						

Email			
Contact Address in Hong Kong ¹	(English) (Chinese)		
Practice Address(es) ² (Please list out ALL premises in Hong Kong on which you will carry on the practice of dentistry and use a separate sheet if necessary)	(English) (Chinese)		
Criminal Conviction	n / Unprofessional Con	duct ³	
I □ have	have NEVER	been convicted in Hong Kong or elsewhere of an offence punishable with imprisonment.	
I □ am	□am NOT	currently the subject of any criminal proceeding(s) in Hong Kong or elsewhere.	
I □ have	have NEVER	been found guilty in Hong Kong or elsewhere of unprofessional conduct.	
I 🗌 am	□am NOT	currently the subject of any disciplinary proceeding(s) in Hong Kong or elsewhere.	

Registration Status in Place(s) Outside Hong Kong

I confirm that since my na	ame was removed from the General Register	er -
	gistered as a dentist in place(s) outside Hond d 4 as a dentist in place(s) outside Hong Ko	
Place	Registration/Licensing Authority	Period of Registration
		to
		to

Note

- 1. According to section 12G(1) of the Dentists Registration Ordinance ("DRO"), "A registered dentist or a person with provisional registration must provide to the Registrar an address in Hong Kong at which he or she may be contacted."
- 2. According to section 12G of the DRO,
 - "(2) Subject to subsection (3), a registered dentist (other than a registered dentist whose name is contained in the non-practising list) must provide to the Registrar the address of all premises in Hong Kong on which he or she carries on the practice of dentistry.
 - (3) Subsection (2) does not require a person to provide—
 - (a) an address of—
 - (i) any premises on which the person provides an outreach medical service (within the meaning of section 9 of the Private Healthcare Facilities Ordinance (Cap. 633)); or
 - (ii) any premises on which the person carries on the practice of dentistry not for gain; or (b) an address of any premises of a class specified under subsection (4).
 - (4) The Council may, by notice published in the Gazette, specify any class of premises for the purposes of subsection (3)(b)."
- 3. If there is any such conviction, findings of unprofessional conduct, or criminal or disciplinary proceedings, full details must be provided separately.
- 4. If you have been registered as a dentist in place(s) outside Hong Kong since your name was removed from the General Register, please submit certificate of standing (original) issued by EACH registration/licensing authority which you have been registered.

Statutory Declaration

WARNING

Applicant must ensure the truth and accuracy of all information provided. Making a false declaration (including failure to disclose relevant information) is an offence punishable with imprisonment under the Crimes Ordinance. Cases of false declaration will be reported to the relevant authorities for investigation and prosecution.

I	(Applicant's name) of			
			(address)	
solemnly and sincered true and accurate.	y declare that all inform	nation and documents prov	vided for this application are	
I make this solemn dec and Declarations Ordi		believing the same to be tr	ue, and by virtue of the Oaths	
Applicant's Signa	ature :			
******	*******	********	*****	
The above declaration	was made on	(date) at	(place)	
Before me (admir	nistrator of oath),			
Signature:				
Name: *Status: [Commissioner for Oa Barrister Notary		Official Stamp	
Address:				
Tel. No.:		Email:		

^{*}A declaration made outside Hong Kong must be made before a Notary Public.

Personal Information Collection Statement

<u>Purpose of Collection</u>

1. The personal data you provide will be used for purposes directly related to your application for restoration of your name to the General Register. It is voluntary for you to provide your personal data. However, if you do not provide sufficient information, we may not be able to process your application.

Disclosure to the Public

- 2. In accordance with section 13 of the Dentists Registration Ordinance ("DRO"), the General Register is published twice every year in the Gazette a list of the name, practice address, qualification and date of qualifications and other particulars that the Registrar of Dentists considers appropriate, of every person who is a person with full registration, a person with limited registration or a person with special registration. The main purpose of such publication is to inform the public who is, or is not, registered as a dentist, and who is entitled to practise dentistry.
- 3. The information published in the Gazette will also be published in the website of the Dental Council of Hong Kong ("Dental Council").

Transfer to Others

4. The personal data you provide will be used mainly by the Dental Council. They may also be disclosed to other persons, bodies or authorities for the purposes set out in paragraph 1 above or in circumstances permitted under the Personal Data (Privacy) Ordinance.

Dental Council may provide information to Secretary for Health

5. Pursuant to section 5AB of the DRO, the Dental Council may provide any information to the Secretary for Health if the Secretary for Health requests the information for the formulation of health care policies.

Access to Personal Data

6. You have a right to request access to and correction of your personal data held by us. A fee may be charged for such access or correction. Request for access or correction should be made in writing to:-

Secretary, The Dental Council of Hong Kong c/o Central Registration Office 17/F, Wu Chung House 213, Queen's Road East Wanchai, Hong Kong

Application for Restoration to the General Register

Guidance Note

- 1. Complete application form clearly and in BLOCK letters. Incomplete or illegible applications will not be processed. Please tick in appropriate box(es). Documents submitted will not be returned.
- 2. Make a statutory declaration before a Commissioner for Oaths, Solicitor or Barrister in Hong Kong or a Notary Public outside Hong Kong to confirm the truth of all information provided. Declaration service is also available free of charge at the Central Registration Office.

3. Submit:-

- (a) Original of certificate of standing issued (within 3 months before the application) by **EACH** registration/licensing authority which you have been registered as a dentist since your name was removed from the General Register. [Only required for persons who have been registered in place(s) outside Hong Kong since your name was removed from the General Register]
- (b) one recent photograph (size: 40 x 60mm to 50 x 70mm) if:-
 - (i) your name was on the Practising List before removal from Part 1 of the General Register but you now apply for restoration to the Non-practising List; or
 - (ii) your name was on the Non-practising List before removal from Part 1 of the General Register but you now apply for restoration to the Practising List.
- (c) photocopy of your identity document (Hong Kong Identity Card or passport) which must be:
 - (i) certified true copies by the administrator of oath before whom the statutory declaration is made; or
 - (ii) verified by the Central Registration Office (you must present both the originals and photocopy in person for verification); and
- (d) a crossed cheque or banker's draft for HK\$4,315* made payable to "The Government of the HK\$AR" or "The Government of the Hong Kong Special Administrative Region". (HK\$3,570* being the prescribed fee for restoration and HK\$745* being fee for a practising certificate (for inclusion of name in the Practising List of Part 1 of the General Register / Part 3 of the General Register / Part 5 of the General Register) or a retention certificate (for inclusion of name in the Non-practising List) [*Fees subject to revision]
- 4. If you are interested in using the autopay facility for future payment of fee for the annual practising certificate, please contact the Central Registration Office for Autopay Authorization Form.

5. Completed application form, together with all supporting documents and the prescribed fees, should be submitted in person or by post to:-

Secretary, The Dental Council of Hong Kong c/o Central Registration Office 17/F, Wu Chung House 213, Queen's Road East Wanchai, Hong Kong

6. Enquiries should be directed to the Central Registration Office at 2961 8655.