

# Wisconsin Department of Safety and Professional Services

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## DENTISTRY EXAMINING BOARD

### DENTAL LICENSE INFORMATION

#### **Important:**

Applicants who have passed the Central Regional Dental Testing Service examination (CRDTS) (CORE) (WREB) **taken within the 5-year period immediately preceding application**, must file the following with the Dentistry Examining Board at the above address to complete the requirements for licensure in the State of Wisconsin.

1. **APPLICATION FOR DENTAL LICENSE (FORM #512).** Please complete application.
2. **LICENSURE FEE.** Checks or money orders are to be made payable to the Department of Safety and Professional Services.
3. **NATIONAL BOARD SCORECARD.** Original score reports must be submitted directly from National Board of Dental Examiners. Both PASSING and FAILING scores are required. Copies sent from applicant, photocopies, online verification or faxes are not acceptable. You may submit an online request at: <https://www.ada.org/1635.aspx>. The testing service should mail your scores directly to: DSPS, ATTN: DENTISTRY EXAMINING BOARD, P.O. BOX 8935, MADISON, WI 53708-8935.
4. **REGIONAL EXAMINATION REQUIREMENTS:**

Original score reports must be submitted directly from the testing agency. Both PASSING and FAILING scores are required. Copies sent from applicant, photocopies, online verifications or faxes are not acceptable. Please request the testing agency to mail your scores directly to: DSPS, ATTN: DENTISTRY EXAMINING BOARD, P.O. BOX 8935, MADISON, WI 53708-8935.

#### **Effective January 1, 2009:**

The Board accepts the following examinations for dentists: CRDTS, WREB, NERB, SRTA, ADEX, and CITA. Parts I and III of ADEX are not required for WREB examinees for examinations taken on or after JANUARY 1, 2009.

- **Northern Regional Examining Board (NERB):**

**Effective September 28, 2005:** The Board started to accept the (NERB) examination for Wisconsin licensure in Dentistry. Acceptance is retroactive for 5 years from September 28, 2005.

- **Western Regional Examining Board (WREB):**

**Effective January 1, 2001:** The Board started to accept WREB examination.

**Prior to December 1, 2005:** WREB applicants were not required to pass ADEX portions I and III.

**Effective December 1, 2005 through December 31, 2008:** Applicants completing the WREB examination must also successfully complete the ADEX examination portions Part I in diagnostic and treatment planning and Part III of the mannequin examination in fixed prosthodontics.

**Effective July 11, 2012:** Applicants completing the WREB exam between December 1, 2005 through December 31, 2008 **are no longer required** to complete the ADEX exam portions Part I in diagnostic and treatment planning and Part III of the mannequin examination in fixed prosthodontics.

- **Central Regional Dental Testing Score (CRDTS):**

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5. **CERTIFICATE OF PROFESSIONAL EDUCATION (FORM #1471).** Have your dental school accredited by The American Dental Association Commission on Dental Accreditation complete this form and submit it along with your application, or request them to send directly to the board office.
6. **VERIFICATION OF LICENSURE IN OTHER STATE(S).** You are required to have each state/country board in which you have ever been licensed submit letters of verification to the Wisconsin Dentistry Examining Board. The letters must indicate your license number, date of issuance, status, and a statement regarding disciplinary actions. These letters will be required in order to complete your application for licensure.
7. **EXAMINATION ON WISCONSIN LAW:** An applicant shall successfully complete an online examination on Wisconsin Statutes and Rules relating to the practice of dentistry before a license can be issued in Wisconsin. Information for the online examination will be provided after an application for licensure has been received at DSPS.
8. **CERTIFICATE OF PROFICIENCY IN CARDIOPULMONARY RESUSCITATION/AED:** Submit a copy of the front and back of a current certificate. This certificate must be signed and dated. See DHS website at <http://dhs.wisconsin.gov> for a listing of approved programs.
9. **NATIONAL PRACTITIONER DATA BANK**  
Applicants must request the “Practitioner Request for Information Disclosure” (Self-Query) from the National Practitioner Data Banks web site: [www.npdb-hipdb.com/welcomesq.html](http://www.npdb-hipdb.com/welcomesq.html). **OPEN THE ENVELOPE** to be certain your application was processed. If processed, mail all contents, including the envelope, to the Dentistry Examining Board at the above address. Further questions regarding this form may be directed to the Data Bank Help Line at 1-800-767-6732.
10. **OTHER.** Include explanations on attached sheets, if required, for answers to questions on application Form #512.

**YOUR APPLICATION WITH ALL SUPPORTING DOCUMENTS MUST BE ON FILE THIRTY DAYS PRIOR TO THE DATE ON WHICH YOU WISH TO BE GRANTED PERMANENT LICENSURE.**

## **FOREIGN DENTAL SCHOOL GRADUATES.**

A foreign trained dentist may qualify for a license if he or she submits to the board evidence of graduation from a foreign dental school and evidence of the successful completion of an accredited postgraduate program in advanced education in general dentistry or an accredited general dental practice residency. In addition, a foreign trained dentist must submit the same information required of non-foreign trained dentists listed in s. DE 2.01(1)(a) to (d), (f) and (g).