



**WEST VIRGINIA  
SECRETARY OF STATE**

**MAC WARNER**

**ADMINISTRATIVE LAW DIVISION**

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5/3/2017 1:40:46 PM

OFFICE OF  
WEST VIRGINIA SECRETARY OF STATE

**FORM 1 -- NOTICE OF A PUBLIC HEARING OR COMMENT PERIOD ON A PROPOSED RULE  
(Page 1)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

COMMENTS LIMITED TO  
**Written**

DATE OF PUBLIC HEARING

LOCATION OF PUBLIC HEARING

DATE WRITTEN COMMENT PERIOD ENDS  
**Saturday, June 03, 2017 1:00 PM**

WRITTEN COMMENTS MAY BE MAILED TO  
**West Virginia Board of Dentistry  
PO Box 1447  
Crab Orchard, WV 25827**

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**  
**Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 5-09



Rule Id: 16432



Document: 49304



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**FORM 1 -- NOTICE OF A PUBLIC HEARING OR COMMENT PERIOD ON A PROPOSED RULE  
(Page 2)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

**PROVIDE A BRIEF SUMMARY OF YOUR PROPOSAL**

**These changes will allow internationally trained dentists to continue their post graduate training in dentistry at a West Virginia Dental School. These changes only affect intern or resident permits and is for post graduate training only.**

**BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.**

**Yes**  
**Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 1)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

**PRIMARY CONTACT**

Susan Combs  
PO Box 1447

Crab Orchard, WV 25827

**SECONDARY CONTACT**

Evan Dewey  
PO Box 1447

Crab Orchard, WV 25827

Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 1)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

SUMMARIZE IN A CLEAR AND CONCISE MANNER WHAT IMPACT THIS MEASURE WILL HAVE ON COSTS AND REVENUES OF STATE GOVERNMENT.

**This procedural rule should have no impact on the costs and revenues of state government.**

Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



Title-Series: 5-09



Rule Id: 16432



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 2)**

AGENCY Dentistry WV Board of  
RULE TYPE Procedural AMENDMENT TO EXISTING RULE Yes TITLE-SERIES 5-09  
RULE NAME Application Procedures for Licensure or Certificate

CITE AUTHORITY §30-4-6

FISCAL NOTE DETAIL -- SHOW OVER-ALL EFFECT IN ITEM 1 AND 2 AND, IN ITEM 3, GIVE AN EXPLANATION OF BREAKDOWN BY FISCAL YEAR, INCLUDING LONG-RANGE EFFECT.

Effect Of Proposal	Current Increase/Decrease (use ' - ')	Next Increase/Decrease (use ' - ')	Fiscal Year (Upon Full Implementation)
--------------------	--	---------------------------------------	---

ESTIMATED  
TOTAL COST

PERSONAL SERVICES

CURRENT EXPENSES

REPAIRS AND  
ALTERATIONS

ASSETS

OTHER

ESTIMATED  
TOTAL REVENUES

Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 3)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

**3. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT). PLEASE INCLUDE ANY INCREASE OR DECREASE IN FEES IN YOUR ESTIMATED TOTAL REVENUES.**

**This procedural rule should have no impact on the costs and revenues of state government.**

**Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 5-09



Rule Id: 16432



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 4)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

PLEASE IDENTIFY ANY AREAS OF VAGUENESS, TECHNICAL DEFECTS, REASONS THE PROPOSED RULE WOULD NOT HAVE A FISCAL IMPACT, AND OR ANY SPECIAL ISSUES NOT CAPTURED ELSEWHERE ON THIS FORM.

**This procedural rule should have no impact on the costs and revenues of state government.**

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



Title-Series: 5-09



Rule Id: 16432



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**FORM 12 -- BRIEF SUMMARY AND STATEMENT OF CIRCUMSTANCES (Page 1)**

AGENCY **Dentistry WV Board of**  
RULE TYPE **Procedural** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **5-09**  
RULE NAME **Application Procedures for Licensure or Certificate**

CITE AUTHORITY **§30-4-6**

SUMMARIZE IN A CLEAR AND CONCISE MANNER CONTENTS OF CHANGES IN RULE AND STATEMENT OF CIRCUMSTANCES REQUIRING THE RULE.

At the request of the West Virginia School of Dentistry, the proposed changes in this rule would allow internationally trained dentists to continue post graduate training at a West Virginia Dental School. These changes are for intern and resident permits and is for training only.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**  
**Susan Combs -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 5-09



Rule Id: 16432



Document: 49304

TITLE 5  
PROCEDURAL RULE  
WEST VIRGINIA BOARD OF DENTISTRY

SERIES 9  
APPLICATION PROCEDURES FOR LICENSURE OR CERTIFICATE

**§5-9-1. General.**

1.1. Scope. -- This rule regulates the requirements for licensure or permit for a dentist, dental specialist, dental hygienist and/or dental assistant.

1.2. Authority. -- W. Va. Code §30-4-6.

1.3. Filing Date. --

1.4. Effective Date. --

**§5-9-2. Definitions.**

As used in this rule, the following words and terms have the following meanings, unless the context clearly indicates otherwise:

2.1. "Board" means the West Virginia Board of Dentistry;

2.2. "License" means a document issued by the board upon original licensure as a dentist, dental specialist or dental hygienist.

2.3. "Certificate" means a document issued by the board to a dental hygienist or dental assistant to perform expanded duties requiring a board approved course and examination.

2.4. "Dental Specialist" means a person issued a license to practice only one certain branch of dentistry.

2.5. "Special Volunteer License" means a license issued to a dentist or dental hygienist who renders services to indigent and needy patients of an organized clinic without any payment or compensation.

**§5-9-3. Application for Licensure of a Dentist.**

3.1. Persons seeking licensure as a dentist shall submit an application to the Board prescribed by the Board.

3.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

3.3. Each applicant shall submit evidence of graduation with a diploma from an approved dental college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office.

3.4. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

3.5. Each applicant shall submit evidence of the applicant's successful completion of an examination by a regional and/or state clinical board approved by the Board sent directly from the regional or state board to the Board's office.

3.6. Each applicant shall successfully complete the West Virginia Dental Law Examination.

3.7. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

3.8. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

3.9. Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members. Applicants who are or have been given the law exam in a mass examination at a dental school within the boundaries of the State of West Virginia are exempted from this requirement.

#### **§5-9-4. Application of Licensure of a Dentist from out of State**

4.1. Persons seeking licensure as a dentist shall submit an application to the Board prescribed by the Board.

4.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

4.3. Each applicant shall submit evidence that he or she holds a license to practice dentistry in another state which was granted after completion of educational requirements substantially equivalent to those required in this state by way of a formal letter from the state issuing said license bearing said state's official seal or stamp sent directly to the Board's office or by submitting evidence of graduation with a diploma from an approved dental college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office.

4.4. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

4.5. Each applicant shall submit evidence of the applicant's successful completion of an examination by a regional and/or state clinical board approved by the Board sent directly from the regional or state board to the Board's office.

4.6. Each applicant shall successfully complete the West Virginia Dental Law Examination.

4.7. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses indicating he or she is not

currently being investigated by a disciplinary authority of another state, does not have charges pending against his or her license to practice dentistry and has never had a license to practice dentistry revoked bearing said entities official seal or stamp sent directly to the Board's office.

4.8. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

4.9. Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members.

#### **§5-9-5. Application of Licensure of a Dental Hygienist**

5.1. Persons seeking licensure as a dental hygienist shall submit an application to the Board prescribed by the Board.

5.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

5.3. Each applicant shall submit evidence of graduation with a degree in dental hygiene from an approved dental hygiene program of a college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office.

5.4. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

5.5. Each applicant shall submit evidence of the applicant's successful completion of an examination by a regional and/or state clinical board approved by the Board sent directly from the regional or state board to the Board's office.

5.6. Each applicant shall successfully complete the West Virginia Dental Law Examination.

5.7. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

5.8. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

5.9. Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members. Applicants who are or have been given the law exam in a mass examination at a dental hygiene school within the boundaries of the State of West Virginia are exempted from this requirement.

#### **§5-9-6. Application for Licensure of a Dental Hygienists from out of State**

6.1. Persons seeking licensure as a dental hygienist shall submit an application to the Board prescribed by the Board.

6.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

6.3. Each applicant shall submit evidence he or she holds a dental hygiene license in another state which was granted after completion of educational requirements substantially equivalent to those required in this state by way of a formal letter from the state issuing said license bearing said state's official seal or stamp sent directly to the Board's office or by submitting evidence of graduation with a degree in dental hygiene from an approved dental hygiene program of a college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office.

6.4. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

6.5. Each applicant shall submit evidence of the applicant's successful completion of an examination by a regional and/or state clinical board approved by the Board sent directly from the regional or state board to the Board's office.

6.6. Each applicant shall successfully complete the West Virginia Dental Law Examination.

6.7. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

6.8. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

6.9. Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members.

#### **§5-9-7. Application for Licensure as a Dental Specialist**

7.1. Persons seeking licensure as a dental specialist must obtain a dental license before applying for a license as a dental specialist.

7.2. Persons seeking licensure as a dental specialist shall submit an application to the Board prescribed by the Board.

7.3. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

7.4. Each applicant shall submit evidence of graduation of a board recognized specialty program accredited by the Commission on Dental Accreditation or its successor agency. A letter from the specialty program verifying the applicants diploma or official transcript bearing the program or registrar's seal is required and must be sent directly from the program to the Board's office.

7.5. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

7.6. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

7.7. Each applicant shall be personally interviewed by the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members or an appointed member of the applicant's specific specialty branch.

**§5-9-8. Application for a Dental Intern or Resident Permit**

8.1. Persons seeking a permit as a dental intern or resident shall submit an application to the Board prescribed by the Board.

8.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

8.3. Each applicant shall submit evidence of graduation with a diploma from an approved dental college, school or dental department of a university. An official transcript bearing the school or registrar's seal is required and must be sent directly from the college or university to the Board's office.

(a) The Board, at its discretion, may consider an applicant who is a graduate of an international dental college, school or dental department of a university as being equivalent to programs accredited by the Commission on Dental Accreditation who has been accepted into a graduate, intern, fellowship or residency program at a West Virginia Dental School for purposes of post-graduate training only.

8.4. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

8.5. Each applicant shall successfully complete the West Virginia Dental Law Examination.

8.6. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

8.7. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

**§5-9-9. Application for a Dental Teaching Permit**

9.1. Persons seeking a dental teaching permit shall submit an application to the Board prescribed by the Board.

9.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

9.3. Each applicant shall submit a letter verifying employment with a dental school or academic medical center and must be sent directly from to the Board's office by the school or medical center.

9.4. Each applicant shall submit evidence of credentialing standards of a dental school or an academic medical center with which the person is to be affiliated: Provided, that the dental school or academic medical center is accredited by the Commission on Dental Accreditation or Joint Commission on Accreditation of Health Care Organizations.

9.5. Each applicant shall submit evidence of the applicant's successful completion of the examination administered by the Joint Commission on National Dental Examinations sent directly from the Commission to the Board's office.

9.6. Each applicant shall successfully complete the West Virginia Dental Law Examination.

9.7. Each applicant shall submit verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

9.8. Each applicant shall submit verification of good moral character by two letters of recommendation from persons who know the applicant professionally. Letters shall be sent directly to the Board office by way of mail or facsimile from the persons writing them. Letters from the applicant's family members will not be accepted.

9.9. Each applicant shall be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members.

#### **§5-9-10. Application for a Dental Anesthesia Permit**

10.1. Persons seeking a permit to induce dental anesthesia shall submit an application to the Board prescribed by the Board.

10.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

10.3. Each applicant shall submit evidence of training in the administration of dental anesthesia for the class of anesthesia permit applied for as set forth in W.Va. Code §30-4A-1 et. seq. A letter from the training or specialty program verifying and detailing the applicants training is required and must be sent directly from the training program to the Board's office.

10.4. Each applicant shall submit current documentation showing successful completion of a Health Care Provider BLS/CPR course. Class 3 and 4 applicants shall submit current documentation showing successful completion of ACLS and/or PALS course if treating pediatric patients.

10.5. Each applicant shall successfully complete an in-office evaluation and on-site inspection of facility, equipment, and auxiliary personal conducted by the Subcommittee on Anesthesia as set forth in W.Va. Code §30-4a-1 et. seq.

#### **§5-9-11. Application for a Qualified Monitor Certificate**

11.1. Persons seeking a qualified monitor certificate shall submit an application to the Board prescribed by the Board.

11.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

11.3. Each applicant shall submit evidence of training as set forth in the W.Va. Code of State Rules §5-12-1 et seq.

11.4. Each applicant shall submit current documentation showing successful completion of a Health Care Provider BLS/CPR course.

11.5. Each applicant shall obtain a certificate to monitor nitrous oxide from the Board unless nitrous oxide is not used in the office where the applicant will be a qualified monitor.

**§5-9-12. Certificate to Perform Expanded Duties**

12.1. Dental Hygienists or Dental Assistants seeking a certificate to perform expanded duties that require a board approved course and examination shall submit an application to the Board prescribed by the Board.

12.2. Each applicant shall submit a fee for application as set forth in the Board's fee schedule.

12.3. Each applicant shall submit evidence of successful completion of a board approved course by being attached to the appropriate section of the application or submitting a copy of a certificate of completion of a board approved course along with their application.

12.4. Each applicant shall submit evidence of passage of a board approved examination by being attached to the appropriate section of the application or being sent directly by the examining entity to the Board's office.

12.5. Each applicant for local anesthesia and/or nitrous oxide monitoring shall submit a copy of a current health care provider BLS/CPR card with their application.

**§5-9-13. Special Volunteer Licenses; Transfer From Current Active License**

13.1. Dentists and Dental Hygienists seeking a special volunteer license or to transfer a current active license to a special volunteer license shall submit an application to the Board prescribed by the Board.

13.2. Each applicant shall submit a copy of a current drivers license or other state or federal identification.

13.3. Each applicant shall submit a copy of the required continuing education for special volunteer licensees.

13.3. Each applicant, if not a citizen of the United States, shall submit a copy of a United States Immigration Services work authorization or permit.

13.4. Each applicant shall submit a copy of the written agreement with an organized clinic and a statement that the clinic will be providing the malpractice insurance required by law.

**§5-9-14. Reinstatement of Expired License**

14.1. Dentists and Dental Hygienists seeking reinstatement of licensure after one year of expiration, shall submit an application for reinstatement to the Board prescribed by the Board.

14.2. Each applicant shall submit an application fee equal to that of an initial application fee as set forth in the Board's fee schedule.

14.3. Each applicant shall pay a portion or all of the renewal fees for the period of time during which their licensure lapsed.

14.4. Each applicant shall submit a verification of good standing of all health care licenses ever held in any jurisdiction by way of a formal letter from each entity issuing said licenses bearing said entities official seal or stamp sent directly to the Board's office.

14.5. The Board may require applicants to be personally interviewed with the West Virginia Board of Dentistry and/or appointed person by the Board who is or are Board Members or past Board Members.

14.6. The Board may require successful completion of the West Virginia Dental Law Examination.

14.7. The Board, at its discretion, may require an applicant for reinstatement show proof of continuing education, be re-examined, evaluated or any other requirements necessary to ensure ability and competency to practice.

**§5-9-15. Application Expiration; Documentation Expiration**

15.1. All applications referred to in this rule expire one year after the date of receipt of the application. However, an application may be held for over a year for requirements due to Board actions.

15.2. Verification letters of good standing of health care licenses expire one year after the date of receipt of the letter, unless an online verification to verify the license remains in good standing can be obtained by the Board.

**§5-9-16. Compensation and Expenses**

16.1. Board Members, appointed past Board Members or members of specialty branches may volunteer or may be paid and reimbursed expenses pursuant to §30-1-1 et seq. and §30-4-1 et seq. of the West Virginia Code.