



**NORTH CAROLINA STATE BOARD  
OF DENTAL EXAMINERS**

**Explanation of Criminal Charges/Convictions**

**NAME:** \_\_\_\_\_  
**DOB:** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

If you checked Yes on your application for licensure, please complete this form for each charge and/or conviction for submission with your application. (NOTE: Several worthless checks may be combined for reporting.) **You are not required to report speeding tickets; however, you MUST report ALL traffic charges involving alcohol, drug or other illegal substance use. You MUST report all charges even if they were later dismissed. IT IS YOUR RESPONSIBILITY TO MAKE SURE YOUR REPORT IS COMPLETE AND ACCURATE.**

For any charge/conviction, you must contact the Clerk of Court in the county jurisdiction where the charge/conviction occurred for a CERTIFIED copy of the court record. The Certified copy of the court record MUST be submitted with this document.

Charge/Conviction (indicate whether the charge is a misdemeanor or felony):

**Explanation:** Describe in detail what happened, including: date, time, where, who you were with, how you came to be arrested and any other pertinent details. (Example: If you were charged with a DWI, include date, time, where you were, whom you were with, the name of the impairing substance, why your vehicle was stopped, etc.)

If this charge is pending, court date is set for:

If there has been resolution to this charge, provide the date, a statement of the outcome and conditions of the judgment, including deferred prosecution and prayer for judgment. (Example: On 1-4-13, I was found guilty of DWI, Level V. My driver's license is revoked for a year and I must have an assessment regarding substance abuse. I will be on unsupervised probation for 1 year.)

If one of the conditions of judgment involves probation that has not been completed, answer the following:

- Is your probation supervised?
- If yes, when is the supervised probation due to terminate? (Provide date.)
- If on supervised probation, obtain a letter from your probation officer to submit with this document indicating you are in compliance with conditions of your probation, the anticipated date of termination of supervised probation, the balance of any fees/restitution to be paid, and any other pertinent information. The letter must include the telephone number of the probation officer.

Are there any conditions of the judgment that you have not satisfied? If yes, explain.

**IF YOU ARE UNSURE WHETHER YOU SHOULD REPORT A CHARGE OR CONVICTION, CALL THE BOARD OFFICE. YOU ARE NOT REQUIRED TO REPORT ANY CHARGES THAT HAVE BEEN EXPUNGED. IT IS YOUR RESPONSIBILITY TO ENSURE THE CHARGE HAS BEEN EXPUNGED. FAILURE TO REPORT A CRIMINAL MATTER BASED ON A FALSE OR MISTAKEN BELIEF THAT THE CHARGE WAS EXPUNGED MAY RESULT IN DISCIPLINARY ACTION BY THE BOARD OR THE DENIAL OF YOUR LICENSE.**

\*\*Print and complete the Explanation of Criminal Charges/Convictions Form and submit to:  
Licensing Department, NC State Board of Dental Examiners, 2000 Perimeter Park Dr., Suite 160, Morrisville, NC 27560