

**CERTIFICATION OF ELIGIBILITY
(dental students enrolled in a non-accredited dental school)
NATIONAL BOARD DENTAL EXAMINATION PART I**

This form is for students who are enrolled in a dental school that is not accredited by the Commission on Dental Accreditation of the American Dental Association. This completed form must be received in the JCNDE Office for each NBDE Part I application submitted. The NBDE Part I application process is not complete without this form.

I certify that _____ (name of student) is currently enrolled in this dental school and has successfully completed all subjects included in the NBDE Part I: Anatomic Sciences, Biochemistry-Physiology, Microbiology-Pathology, and Dental Anatomy and Occlusion.

Signature of Dean or Registrar
Printed name of Dean or Registrar
Dental School Name
Dental School Address

SCHOOL SEAL (Embossed)

Date

Mail completed form to: Joint Commission on National Dental Examinations, 211 East Chicago Avenue, Suite 600, Chicago, IL 60611-2637