Joint Commission on National Dental Examinations (JCNDE)

Informed Consent and Authorization for Use and Disclosure

Direct questions to:

Joint Commission on National Dental Examinations (JCNDE)
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800.232.1694

PLEASE READ THIS DOCUMENT CAREFULLY

You are submitting an application to take the Dental Licensure Objective Structured Clinical Examination (DLOSCE). The purpose of the test is to provide information to US dental boards concerning whether a candidate for dental licensure possesses the necessary level of clinical skills to safely practice entry-level dentistry.

Please read this document carefully and ask questions about anything that is unclear to you, or that you do not understand. If anything is unclear to you or there is anything you do not understand, please contact the Joint Commission on National Dental Examinations, whose contact information is at the top of this form.

KEY INFORMATION

The JCNDE will administer the examination to provide information to US dental boards concerning whether a candidate for dental licensure possesses the necessary level of clinical skills to safely practice entry-level dentistry. If you participate, you will report to the Prometric (“testing company”) testing center of your choice. You will present a government issued ID with photograph and signature, and a secondary ID with signature. For identification purposes, you will be photographed, and your fingerprints will be collected (see the JCNDE Biometric Data Privacy Policy and Consent Form below). The testing session will be videotaped.

You will respond to examination content at the testing center. Your responses and test results will be collected by the testing center and transmitted to the JCNDE. After the test, you will be asked to complete a survey.

The ADA JCNDE is not aware of any risks involving your participation in the examination, but there may be risks of which the ADA JCNDE is unaware. The JCNDE plans to communicate test findings (e.g. failure rates, validity, reliability, etc.) through presentations that will be posted on the examination web site (ada.org/jcnede). You must agree to keep the examination content and your responses, survey questions and your answers confidential.

Information about you. Your photograph and fingerprints will be used by the testing company to verify your identity. The testing company will retain your photograph and fingerprints for purposes of verifying your identity after breaks and on future JCNDE or ADA exams. The videotape will be retained by the testing company and shared with the JCNDE upon request to help prevent and detect test cheating and fraud.
The testing company will transmit to the JCNDE your identity, contact information, test responses, and results, where this information will be retained indefinitely in identifiable form and may be used by the JCNDE—alone or in combination with other information such as your survey responses, and information about you supplied to the JCNDE by your dental school—to evaluate, improve, and enhance the quality of the examination, and to set benchmarks. JCNDE may also de-identify such information to use for potential future research.

Complete security and confidentiality cannot be promised, but the JCNDE will make reasonable efforts to keep your JCNDE-maintained, identifiable information secure and confidential.

CONSENT AND CERTIFICATION

By taking the DLOSCE, I certify and consent to the following:

I have met the eligibility requirements for the examination.

I consent to participation in the examination, including responding to examination content, completing a survey about examination content.

I consent to the JCNDE using information about me for purposes of evaluating, improving, and enhancing the quality of the examination, and to set benchmarks. I further consent to the JCNDE and others using de-identified information about me for possible future research.

I consent to my dental school disclosing information about me to the JCNDE, including but not limited to my name, DENTPIN, grade point average, my grades in classes, and my grades on clinical examinations.

I will maintain the confidentiality of the examination content and my responses, the survey questions and my answers, at all times. I will not reproduce or attempt to reproduce examination content through memorization, recording, copying, or other means. I will not provide information concerning examination content or my responses that might affect the examination’s ability to accurately assess candidates’ skills, or that might provide an unfair advantage to other candidates. For example, I will neither make use of nor participate in the sharing or distribution of information regarding examination content or answers (via electronic means or otherwise).

BIOMETRIC DATA PRIVACY CONSENT FORM

The individual named below has been advised and understands that the Joint Commission on National Dental Examinations (JCNDE) service providers collect, retain, and use biometric data for purposes of identifying test candidates and others and preventing test-taking fraud in connection with the taking of JCNDE testing activities and the testing activities of JCNDE’s other clients.

The individual understands that he or she is required to provide biometric data to the JCNDE’s service provider as a condition of taking the test.

The individual acknowledges that he/she has had the opportunity to print the attached Biometric Data Privacy Policy, and that he/she voluntarily consents to JCNDE’s, and the JCNDE’s service providers’, collection, storage, and use of biometric data through a biometric scanning device, and voluntarily consents to the collection of such biometric data for the purposes identified herein.
The Joint Commission on National Dental Examinations (JCNDE) has instituted the following biometric data privacy policy:

**Biometric Data Defined**

As used in this policy, “biometric data” includes fingerprints or palm vein scans.

**Purpose for Collection of Biometric Data**

The JCNDE service providers collect, store, and use biometric data solely for identification of test candidates and other individuals participating in JCNDE projects and for test-taking fraud prevention.

**Disclosure and Authorization**

To the extent that JCNDE service providers collect, capture, or otherwise obtain biometric data relating to an individual, the JCNDE must first:

- Inform the individual in writing that a JCNDE service provider will collect the individual’s biometric data, and that JCNDE authorizes its service provider to collect, process and maintain such biometric data;
- Inform the individual in writing of the specific purpose and length of time for which the individual’s biometric data is being collected, stored, and used; and
- Receive a written release signed by the individual (or his or her legally authorized representative) authorizing the JCNDE service provider to collect, store, and use the individual’s biometric data for the specific purposes disclosed by the JCNDE, and for JCNDE to so authorize its service provider.

JCNDE shall not, nor shall it authorize its service providers, to sell, lease, trade, or otherwise profit from individuals’ biometric data; provided, however, that JCNDE’s service providers may be paid for products or services used by JCNDE that utilize such biometric data.

**Disclosure**

JCNDE will not disclose or disseminate any biometric data, and will not authorize its service providers to disclose or disseminate any biometric data, to anyone without/unless:

- First obtaining written consent to such disclosure or dissemination;
- The disclosed data completes a financial transaction requested or authorized by the individual;
- Disclosure is required by state or federal law or municipal ordinance; or
- Disclosure is required pursuant to a valid warrant or subpoena issued by a court of competent jurisdiction.
Retention Schedule

JCNDE shall retain biometric data only until the first of the following occurs, and shall require that its service providers permanently destroy such data at that time:

a. The initial purpose for collecting or obtaining such biometric data has been satisfied; or

b. Within 3 years of the individual's last interaction with the JCNDE.

Data Storage

JCNDE shall use, and shall require its service providers to use, a reasonable standard of care to store, transmit and protect from disclosure any paper or electronic biometric data collected. Such storage, transmission, and protection from disclosure shall be performed in a manner that is the same as or more protective than the manner in which JCNDE or the service provider stores, respectively, transmits and protects from disclosure other confidential and sensitive information, such as personal information that can be used to uniquely identify an individual or an individual's account or property, such as genetic markers, genetic testing information, account numbers, PINs, driver's license numbers and social security numbers.