



## Inspire. Give back. Be involved. Volunteer!



People volunteer for a variety of reasons. If you have been thinking of becoming involved in organized dentistry, you may want to consider joining CDSBC's volunteer network.

We are currently building our network of dentists, certified dental assistants and members

of the public who are interested in participating in the work of the College.

### Volunteers can become involved by:

- participating in working groups charged with specific time-limited mandates or tasks
- becoming involved in short-term projects that require specific expertise and input from the dental community, such as reviewing practice guidelines or documents
- instructing in CDSBC's remediation program to help registrants improve their knowledge or practice
- joining a CDSBC committee (minimum two-year term)

A question we sometimes hear is, "I submitted an application before. Why was I never called?" CDSBC considers factors such as expertise and experience, as well as demographic representation, when selecting volunteers. While we make an effort to involve as many individuals as possible, we are not always able to match the number of interested volunteers to the number of available vacancies or special projects. We do, however, keep all volunteer registrations on file as a resource.

For more details and information about the College, our committees and activities, please visit our website at [www.cdsbc.org](http://www.cdsbc.org), "About Us", "Committees".

**Please complete the application form on the next page and return this form with a copy of your biography or resume to:**

**[volunteer@cdsbc.org](mailto:volunteer@cdsbc.org)**

**Fax:** 604 734 9448

**Toll Free Fax:** 1 866 734 9448



## VOLUNTEER NETWORK REGISTRATION

### Contact information

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Daytime phone \_\_\_\_\_ Fax \_\_\_\_\_

### Registration (Dentists and CDAs)

Graduation year \_\_\_\_\_ Registration/  
Certification # \_\_\_\_\_  Practising  Non-practising  Retired

### Status

General dentist  Specialist: \_\_\_\_\_  
 Certified dental assistant  Member of the public

### Areas/topics of interest (check as many as apply)

Ethics  Practice standards and guidelines  Sedation and accreditation  
 Policy development  Remediation program  Registration and certification  
 Complaints  Quality assurance and continuing  
 Review of CDSBC documents competence

### Availability

#### Thinking of time commitment, please indicate your preference (check all that apply)

Committee membership (minimum 2 years)  Working group (6 – 12 months)  
 Special projects (several hours – a few months)  Remediation program instructor (varies, programs  
are customized)

### Please describe any special areas of interest or expertise you feel would be valuable to CDSBC:

### Please outline any previous or current volunteer experience:

### \*Please submit a CV/resume if possible

Date -M/D/Y \_\_\_\_\_ Signature \_\_\_\_\_