



Board of Dental Health Care

Community Dental Health Coordinator

Application Manual

Table of Contents

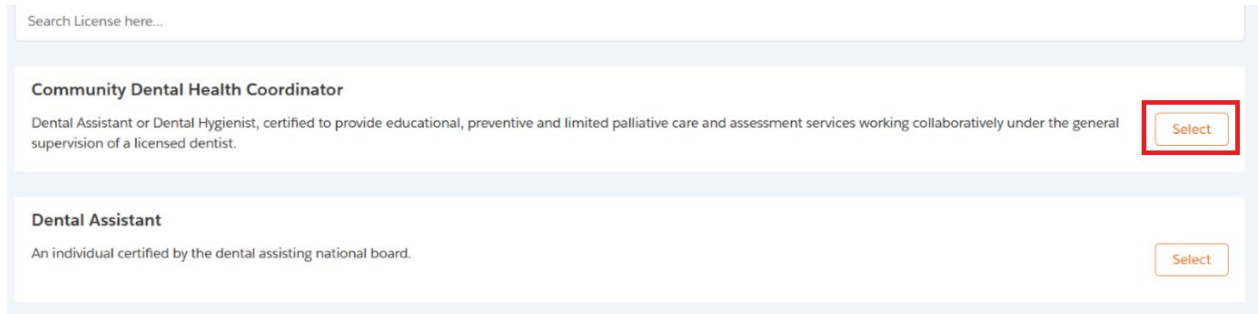
Application for Community Dental Health Coordinator

Introduction	3
Basic Information Page	4
Jurisprudence Exam	7
Questions Page	8
Upload Documents Page	10
Attestation Page	13
Payment Page	13

BOARD OF DENTAL HEALTH CARE APPLICATION MANUAL

Application for Community Dental Health Coordinator

1. Click the “Select” button to the right of the Community Dental Health Coordinator license type.

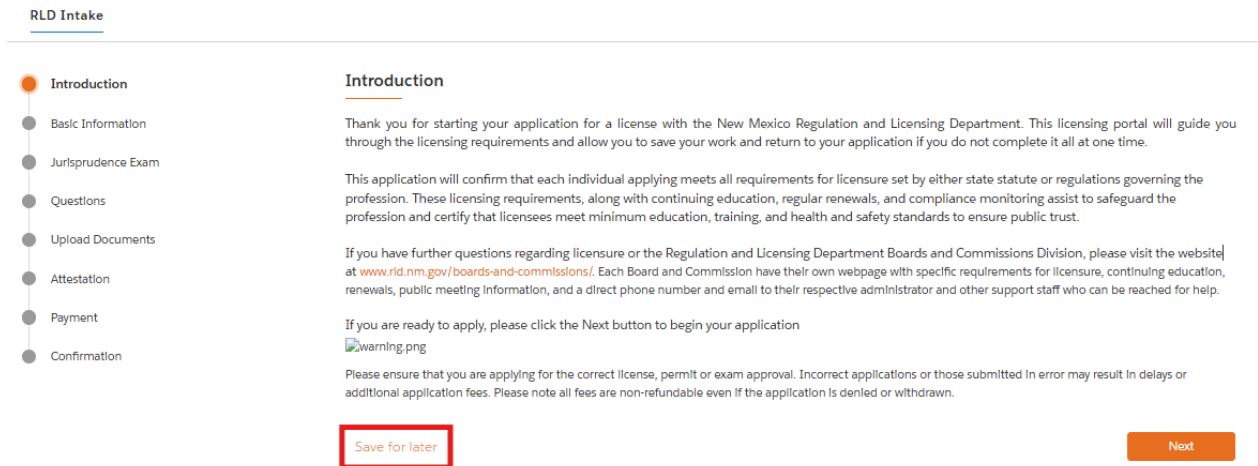


Search License here...

Community Dental Health Coordinator
Dental Assistant or Dental Hygienist, certified to provide educational, preventive and limited palliative care and assessment services working collaboratively under the general supervision of a licensed dentist. **Select**

Dental Assistant
An individual certified by the dental assisting national board. **Select**

2. At any time of the application, you can select the “Save for later” option to save a draft of the application that you can return to and complete at your convenience. This will ensure you don’t lose any progress you have made if you can’t complete the application in one sitting.



RLD Intake

Introduction

Thank you for starting your application for a license with the New Mexico Regulation and Licensing Department. This licensing portal will guide you through the licensing requirements and allow you to save your work and return to your application if you do not complete it all at one time.

This application will confirm that each individual applying meets all requirements for licensure set by either state statute or regulations governing the profession. These licensing requirements, along with continuing education, regular renewals, and compliance monitoring assist to safeguard the profession and certify that licensees meet minimum education, training, and health and safety standards to ensure public trust.

If you have further questions regarding licensure or the Regulation and Licensing Department Boards and Commissions Division, please visit the website at www.rld.nm.gov/boards-and-commissions/. Each Board and Commission have their own webpage with specific requirements for licensure, continuing education, renewals, public meeting information, and a direct phone number and email to their respective administrator and other support staff who can be reached for help.

If you are ready to apply, please click the Next button to begin your application

 warning.png

Please ensure that you are applying for the correct license, permit or exam approval. Incorrect applications or those submitted in error may result in delays or additional application fees. Please note all fees are non-refundable even if the application is denied or withdrawn.

Save for later **Next**

3. On the Introduction page, read through the information and select the “Next” button on the bottom right of the screen when you are done.



RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Introduction

Thank you for starting your application for a license with the New Mexico Regulation and Licensing Department. This licensing portal will guide you through the licensing requirements and allow you to save your work and return to your application if you do not complete it all at one time.

This application will confirm that each individual applying meets all requirements for licensure set by either state statute or regulations governing the profession. These licensing requirements, along with continuing education, regular renewals, and compliance monitoring assist to safeguard the profession and certify that licensees meet minimum education, training, and health and safety standards to ensure public trust.

If you have further questions regarding licensure or the Regulation and Licensing Department Boards and Commissions Division, please visit the website at www.rld.nm.gov/boards-and-commissions/. Each Board and Commission have their own webpage with specific requirements for licensure, continuing education, renewals, public meeting information, and a direct phone number and email to their respective administrator and other support staff who can be reached for help.

If you are ready to apply, please click the Next button to begin your application

warning.png

Please ensure that you are applying for the correct license, permit or exam approval. Incorrect applications or those submitted in error may result in delays or additional application fees. Please note all fees are non-refundable even if the application is denied or withdrawn.

[Save for later](#)

[Next](#)

- On the Basic Information page, verify that all information is valid and up to date.

RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ Applicant Information

* First Name Middle Name * Last Name

Any other name(s)

* Phone Number

* Email Address

▼ Mailing Address

* Mailing Street

* Mailing City

* Mailing State

Mailing County (if in New Mexico)

* Mailing Zip

* Mailing Country

[Save for later](#)

[Previous](#)

[Next](#)

- If Yes, select the "Next" button at the bottom right of the page.

RLD Intake

- Introduction
- Basic Information**
- Jurisprudence Exam
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ **Applicant Information**

*First Name Middle Name *Last Name

Any other name(s)

*Phone Number *Email Address

▼ **Mailing Address**

*Mailing Street

*Mailing City *Mailing State

Mailing County (if in New Mexico) *Mailing Zip

*Mailing Country

[Save for later](#) [Previous](#) [Next](#)

- b. If **No**, select the “My Profile” button at the top left to update your information.

RLD Intake View

- Introduction
- Basic Information**
- Jurisprudence Exam
- Questions
- Uploaded Documents
- Attestation
- Payment

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ **Applicant Information**

*First Name Middle Name *Last Name

Any other name(s)

- i. Select the “Edit” button at the bottom right of the page.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

Race Ethnicity Preferred Language Are you a New Mexico Resident?

Date of Birth Gender

Primary Phone No Business Phone No

Identifier Type Identifier Number

Mailing Address

Mailing Street

City State/Province

Country Zip Code County (If in New Mexico)

[Edit](#)

- ii. Enter in all relevant updated data and select “Save” at the bottom right when completed.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

*Race *Ethnicity *Preferred Language *Are you a New Mexico Resident?

*Date of Birth *Gender

*Primary Phone No Business Phone No

*Identifier Type *Identifier Number

Mailing Address

*Mailing Street

*City State/Province

Country *Zip Code County (If in New Mexico)

[Cancel](#) [Save](#)

- iii. You will need to restart your application to ensure the updated data is listed. Return to “Step 1: Select Community Dental Health Coordinator Application” to continue.

5. On the Jurisprudence Exam page, select the “Launch New” button on the page.

RLD Intake

Jurisprudence Exam

You must have a passing score to navigate further.

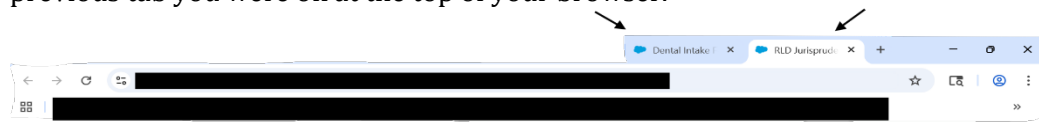
Attempts : 0

Launch New **Refresh**

Attempt	Name	Examination Date	Score in %	Result
---------	------	------------------	------------	--------

Save for later **Previous** **Next**

- a. A new page will open up for the exam, once the exam is complete you can select the previous tab you were on at the top of your browser.



- b. You will be able to view the attempt you made at the exam by selecting the orange “Refresh” button at the top right and verify that you passed.

RLD Intake

Jurisprudence Exam

You must have a passing score to navigate further.

Attempts : 0

Launch New **Refresh**

Attempt	Name	Examination Date	Score in %	Result
---------	------	------------------	------------	--------

Save for later **Previous** **Next**

- c. If you have not passed, you will not be able to continue the application.

Note: You can make multiple attempts of the exam to receive a passing grade. To make a new attempt select the “Launch New” button again.

RLD Intake

Jurisprudence Exam

You must have a passing score to navigate further.

Attempts : 1

Launch New **Refresh**

Attempt	Name	Examination Date	Score in %	Result
1	PEX [REDACTED]	[REDACTED]	[REDACTED]	Fail

Save for later **Previous** **Next**

- d. Once you have passed the exam, you can select the “Next” button at the bottom right of the page.



RLD Intake View

- Introduction
- Basic Information
- Jurisprudence Exam**
- Questions
- Uploaded Documents
- Attestation
- Payment

Jurisprudence Exam

Attempts : 1

Attempt	Name	Examination Date	Score in %	Result
1	PEX [REDACTED]	[REDACTED]	[REDACTED]	Pass

[Previous](#) [Next](#)

6. On the Questions page, please answer all questions accurately with the most recent information. Please provide any relevant details in the box below any questions marked with “Yes.” You are also required to upload any related documentation and other supporting documents on the Uploaded Documents page, later in this application.

RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions**
- Upload Documents
- Attestation
- Payment
- Confirmation

Questions

* Community Dental Health Coordinator Program granting Certification Institution Name
[REDACTED]

* Community Dental Health Coordinator Program Program Certification obtained Year
[REDACTED]

Enter the Year Community Dental Health Coordinator Program Program Certification was obtained (YYYY)

* Expiration Date of Cardiac Pulmonary Resuscitation (CPR) Certification
[REDACTED]

Dental Assistant License Number
[REDACTED]

Dental Assistant License Expiration Date
[REDACTED]

* Have you been convicted of a felony offense in any jurisdiction that would be considered a disqualifying criminal conviction, as outlined in 16.5.1.30 NMAC?
☐ Yes
☒ No

* Have you ever had any disciplinary actions, or do you have any pending actions, or have you ever been investigated by any professional licensing authority?
☐ Yes
☒ No

* Have you ever voluntarily surrendered a license or certification to practice dentistry or any other health related profession in any state, foreign country, territory, or institution?
☐ Yes
☒ No

* Are you currently participating in a supervised rehabilitation program or professional assistance program that monitors you in order to assure that you are not engaging in the illegal use of controlled dangerous substances?
☐ Yes
☒ No

* Have you ever been a defendant in a legal action involving professional liability (malpractice), or had a professional liability claim paid in your behalf, or such a claim yourself?
☐ Yes
☒ No

List details of the dentist(s) who are collaborating with you in a supervisory capacity.
Upload signed affidavit from supervising dentist (can be found on the NMRLD website).

* Dental Supervisor Information

[Add New](#)

Supervisor Name	Supervisor License Number	Start Date	End Date	Action
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

[Save for later](#) [Previous](#) [Next](#)

- a. To add new Dental Supervision Information: Select the “Add New” button at the top of the Dental Supervisor section.

RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions**
- Upload Documents
- Attestation
- Payment
- Confirmation

Questions

* Community Dental Health Coordinator Program granting Certification Institution Name

[Redacted]

* Community Dental Health Coordinator Program Program Certification obtained Year

[Redacted]

Enter the Year Community Dental Health Coordinator Program Program Certification was obtained (YYYY)

* Expiration Date of Cardiac Pulmonary Resuscitation (CPR) Certification

[Redacted]

Dental Assistant License Number

[Redacted]

Dental Assistant License Expiration Date

[Redacted]

* Have you been convicted of a felony offense in any jurisdiction that would be considered a disqualifying criminal conviction, as outlined in 16.5.1.30 NMAC?

☐ Yes
☒ No

* Have you ever had any disciplinary actions, or do you have any pending actions, or have you ever been investigated by any professional licensing authority?

☐ Yes
☒ No

* Have you ever voluntarily surrendered a license or certification to practice dentistry or any other health related profession in any state, foreign country, territory, or institution?

☐ Yes
☒ No

* Are you currently participating in a supervised rehabilitation program or professional assistance program that monitors you in order to assure that you are not engaging in the illegal use of controlled dangerous substances?

☐ Yes
☒ No

* Have you ever been a defendant in a legal action involving professional liability (malpractice), or had a professional liability claim paid in your behalf, or such a claim yourself?

☐ Yes
☒ No

List details of the dentist(s) who are collaborating with you in a supervisory capacity.
Upload signed affidavit from supervising dentist (can be found on the NMRLD website).

* Dental Supervisor Information

Supervisor Name	Supervisor License Number	Start Date	End Date	Action
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Dropdown]

[Add New](#)

[Save for later](#) [Previous](#) [Next](#)

b. Search Dentist by name, select a Supervisor, and click Save & Next.

* Provide any relevant details below. You are also required to upload any related documentation as other supporting documents for this application

Supervisor Information

Search Dentist

[Redacted]

[Search](#)

[Cancel](#) [Save & Next](#)

c. To complete the Questions page, select the “Next” button at the bottom right of the page.



RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions**
- Upload Documents
- Attestation
- Payment
- Confirmation

Questions

*Community Dental Health Coordinator Program granting Certification Institution Name
[Redacted]

*Community Dental Health Coordinator Program Program Certification obtained Year
[Redacted]

Enter the Year Community Dental Health Coordinator Program Program Certification was obtained (YYYY)
[Redacted]

*Expiration Date of Cardiac Pulmonary Resuscitation (CPR) Certification
[Redacted]

Dental Assistant License Number
[Redacted]

Dental Assistant License Expiration Date
[Redacted]

*Have you been convicted of a felony offense in any jurisdiction that would be considered a disqualifying criminal conviction, as outlined in 16.5.1.30 NMAC?

☐ Yes
☒ No

*Have you ever had any disciplinary actions, or do you have any pending actions, or have you ever been investigated by any professional licensing authority?

☐ Yes
☒ No

*Have you ever voluntarily surrendered a license or certification to practice dentistry or any other health related profession in any state, foreign country, territory, or institution?

☐ Yes
☒ No

*Are you currently participating in a supervised rehabilitation program or professional assistance program that monitors you in order to assure that you are not engaging in the illegal use of controlled dangerous substances?

☐ Yes
☒ No

*Have you ever been a defendant in a legal action involving professional liability (malpractice), or had a professional liability claim paid in your behalf, or such a claim yourself?

☐ Yes
☒ No

List details of the dentist(s) who are collaborating with you in a supervisory capacity.
Upload signed affidavit from supervising dentist (can be found on the NMRLD website).

*Dental Supervisor Information

[Add New](#)

Supervisor Name	Supervisor License Number	Start Date	End Date	Action
[Redacted]	[Redacted]	[Redacted]	[Redacted]	▼

[Save for later](#) [Previous](#) [Next](#)

7. On the Upload Documents page, attach all requested and relevant documents to their designated column.

RLD Intake

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions
- Upload Documents**
- Attestation
- Payment
- Confirmation

Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
* Current Cardiac Pulmonary Resuscitation (CPR) or Basic Life Support (BLS) Card	Proof of current basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification accepted by the American heart association, the American red cross, or the American safety and health Institute (ASHI); cannot be a self-study course	📎		
* Certificate of Coursework or Official Transcripts	Proof of official transcripts with required courses for certification or official transcripts verifying successfully passing all required coursework as defined in 61-5A-6 of the act.	📎		
Other Supporting Documents	Any supporting documents that could assist in review of the application.	📎		

[Save for later](#) [Previous](#) [Next](#)

- a. Select the blue upload icon in each section to upload a document.

RLD Intake

- ✓ Introduction
- ✓ Basic Information
- ✓ Jurisprudence Exam
- ✓ Questions
- **Upload Documents**
- Attestation
- Payment
- Confirmation

Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
★ Current Cardiac Pulmonary Resuscitation (CPR) or Basic Life Support (BLS) Card	Proof of current basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification accepted by the American heart association, the American red cross, or the American safety and health Institute (ASHI); cannot be a self-study course			
★ Certificate of Coursework or Official Transcripts	Proof of official transcripts with required courses for certification or official transcripts verifying successfully passing all required coursework as defined in 61-5A-6 of the act.			
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

Previous

Next

- b. Review the document size and type requirements before uploading, then select the Upload File button.

Upload

Please attach a copy of the required document.

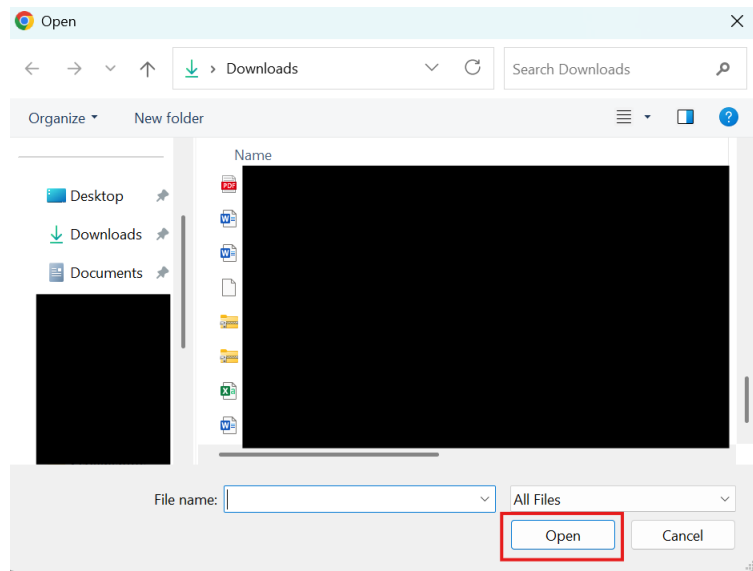
Note that:

1. File size should not exceed 20MB.
2. File extensions will be accepted only of type doc, docx, pdf, png, ttf, jpg, jpeg, gif, xls.
3. Documents may be uploaded as individual files or as a single merged file on the next page.

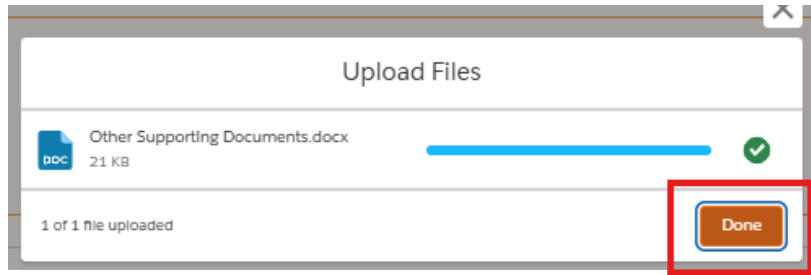
 Upload File  Drop File

Done

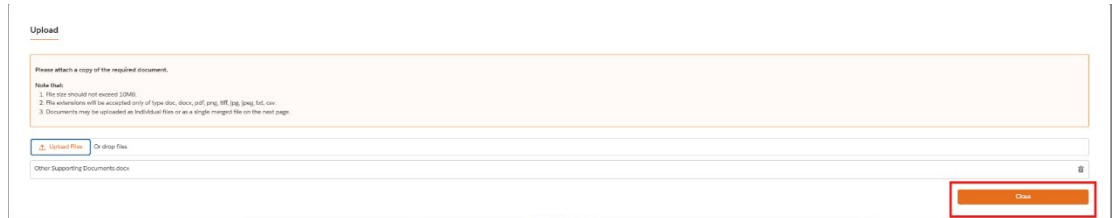
- c. Select the appropriate document from your files and then select “Open”



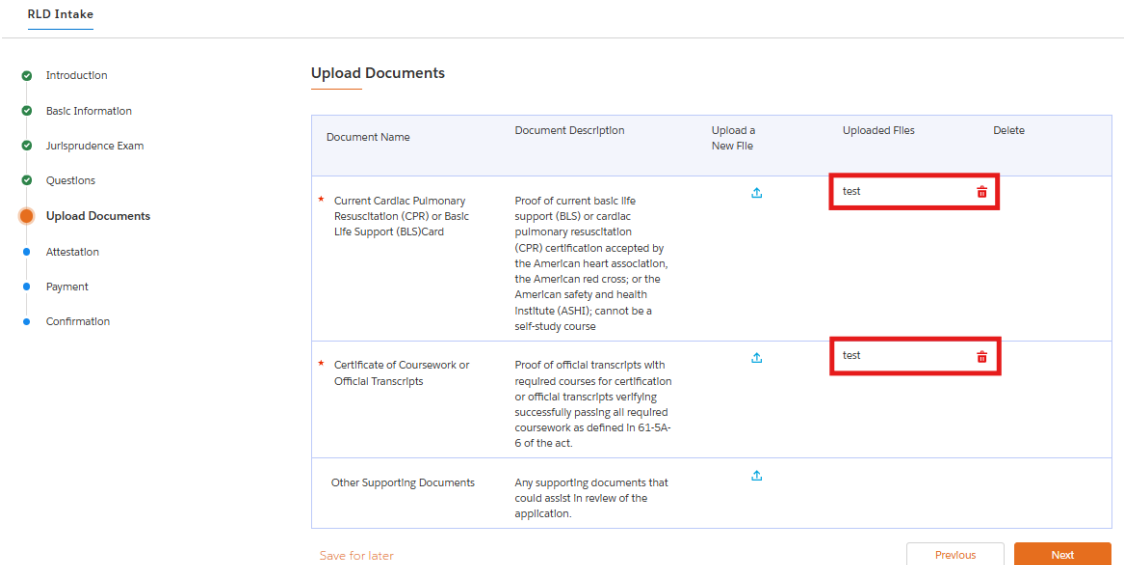
- d. The file will notify you when it's completed. Select the “Done” button when it's completed.



- e. You will be able to see your document added and can then select the “Close” option.



- f. You will be able to see the documents in each section once you have completed the uploads.



- g. Once all documents are added, select the orange “Next” button.

RLD Intake

- ✓ Introduction
- ✓ Basic Information
- ✓ Jurisprudence Exam
- ✓ Questions
- **Upload Documents**
- Attestation
- Payment
- Confirmation

Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
* Current Cardiac Pulmonary Resuscitation (CPR) or Basic Life Support (BLS) Card	Proof of current basic life support (BLS) or cardiac pulmonary resuscitation (CPR) certification accepted by the American heart association, the American red cross, or the American safety and health Institute (ASHI); cannot be a self-study course		test	
* Certificate of Coursework or Official Transcripts	Proof of official transcripts with required courses for certification or official transcripts verifying successfully passing all required coursework as defined in 61-5A-6 of the act.		test	
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

Previous

Next

8. On the Attestation page, review the statement on the screen. Then select the checkbox to certify your agreement. After, enter your name and select the "Next" button at the bottom right.

RLD Intake

- ✓ Introduction
- ✓ Basic Information
- ✓ Jurisprudence Exam
- ✓ Questions
- ✓ Upload Documents
- **Attestation**
- Payment
- Confirmation

Attestation

Application Attestation

☐ I hereby certify that I am the person described and identified in this application; this application contains no willful misrepresentation; and the information given by me is true and complete to the best of my knowledge and belief.
I further certify I will, upon receipt, read the New Mexico Dental Health Care Act and Rules and fully understand that I bind myself to be governed by them.

* Applicant Name

Date

10/07/2025

Save for later

Previous

Next

9. On the Payment page, review the notice before making any selections.

RLD Intake

- ✓ Introduction
- ✓ Basic Information
- ✓ Jurisprudence Exam
- ✓ Questions
- ✓ Upload Documents
- ✓ Attestation
- **Payment**
- Confirmation

Payment

Select your mode of payment and click "Pay and Submit" to Input your payment Information.
Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee Imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Note: Only select "Operating Transfer" if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.

* Mode of Payment

The amount to be paid is \$

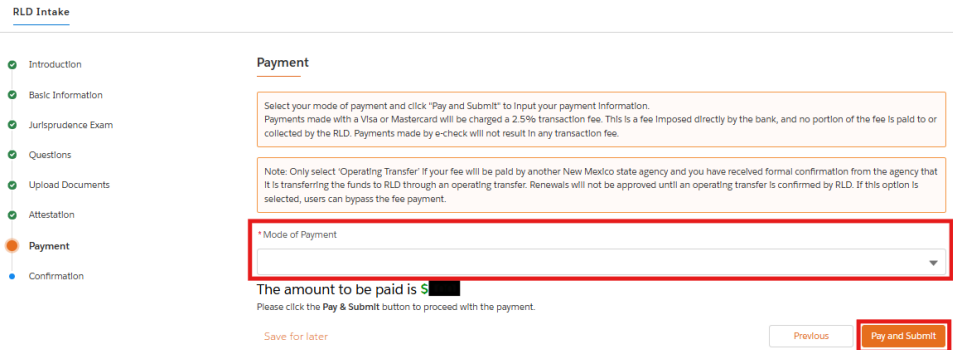
Please click the **Pay & Submit** button to proceed with the payment.

Save for later

Previous

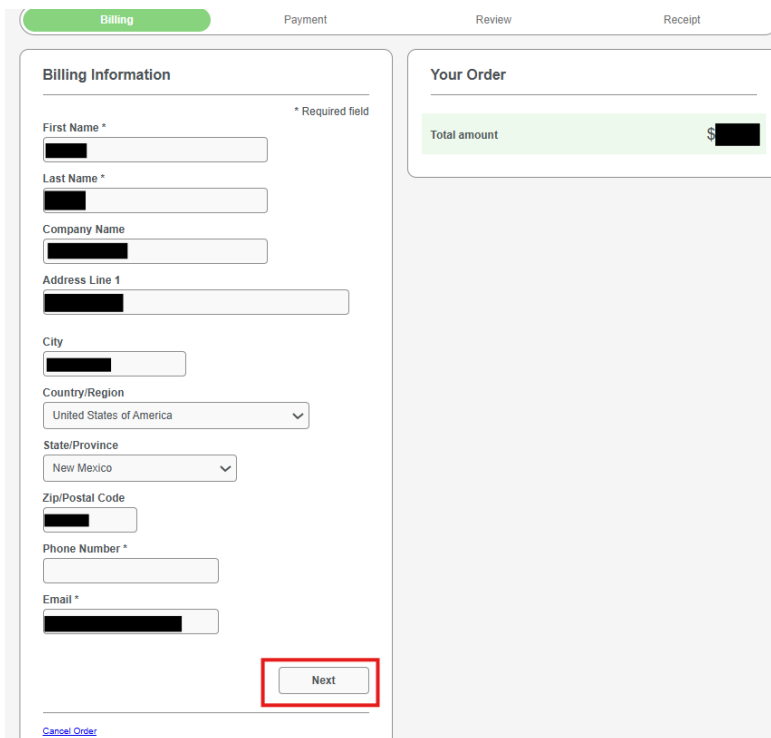
Pay and Submit

- a. Select a Mode of Payment then the “Pay and Submit” button. When selecting either Credit Card (Visa or Mastercard) or E-Check as your payment method, a new tab will open directing you to the Cybersource Payment Gateway screen. Please disable any pop-up blockers to ensure the page opens correctly in the new tab.
- b. *Note: Payment is a separate system and your credit card info is not stored or saved by RLD. Cybersource is a SoNM billing platform, and this is not phishing or other malware. Upon payment completion, you will receive a payment receipt to the email address you have entered in the Payment Gateway.*



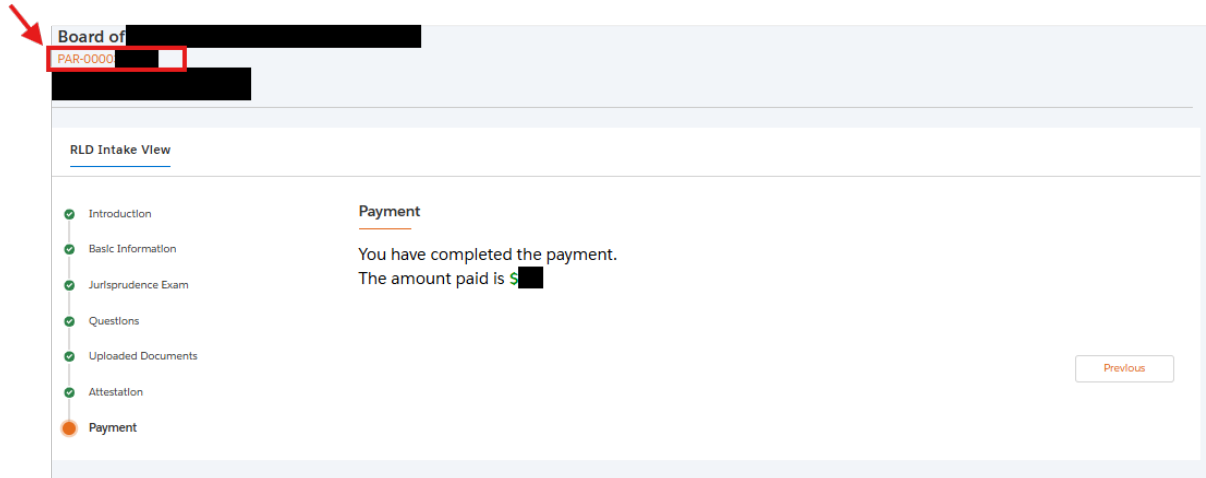
The screenshot shows the 'RLD Intake' page with a sidebar menu on the left containing: Introduction, Basic Information, Jurisprudence Exam, Questions, Upload Documents, Attestation, **Payment** (highlighted), and Confirmation. The main content area is titled 'Payment' and includes two informational boxes. The first box states: 'Select your mode of payment and click "Pay and Submit" to input your payment information. Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.' The second box states: 'Note: Only select "Operating Transfer" if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.' Below these boxes is a dropdown menu labeled '* Mode of Payment'. Underneath the dropdown, it says 'The amount to be paid is \$' followed by a redacted amount. A note below that says 'Please click the Pay & Submit button to proceed with the payment.' At the bottom of the form are three buttons: 'Save for later', 'Previous', and 'Pay and Submit' (which is highlighted with a red border).

- c. Ensure all required fields are completed and click “Next” button to proceed through entire payment.



The screenshot shows the 'Billing Information' form, which is part of a multi-step process with tabs for Billing, Payment, Review, and Receipt. The 'Billing' tab is active. The form contains several input fields: First Name *, Last Name *, Company Name, Address Line 1, City, Country/Region (dropdown menu showing 'United States of America'), State/Province (dropdown menu showing 'New Mexico'), Zip/Postal Code, Phone Number *, and Email *. A red box highlights the 'Next' button at the bottom right of the form. A 'Cancel Order' link is located at the bottom left. To the right of the form, under the 'Your Order' section, it shows 'Total amount' followed by a redacted amount.

10. Once your payment is completed, your application is now complete and will be submitted for approval. To check the status of your application, please contact your board or division directly. Please be sure to reference your application number, which begins with **PAR-** and can be found at the top of your application.



The screenshot shows the 'RLD Intake View' page. At the top, a red arrow points to the 'Board of' dropdown menu, which has a red box around the 'PAR-0000' option. Below this, the 'Payment' step is highlighted in the progress bar. The text on the right says: 'You have completed the payment. The amount paid is \$[redacted]'. A 'Previous' button is visible on the right side.

11. On the home page, the application will appear under My Applications with **Submitted** status.

Licenses & Applications

My Applications

Application ID	License Type	Application Type	Applied Date	Status	Action
PAR-0000 [redacted]	[redacted]	New	10/7/2025	Draft	
PAR-0000 [redacted]	[redacted]	New	7/29/2025	Draft	
PAR-0000 [redacted]	[redacted]	New	7/28/2025	Submitted	View Review Checklist

View All