



# SDHA

# Saskatchewan Dental Hygienists' Association

Unit 320 – 350 3<sup>rd</sup> Ave N  
Saskatoon, SK S7K 6G7

Tel (306) 931-7342  
E-mail: [admin@sdha.ca](mailto:admin@sdha.ca)

## REQUEST FOR LETTER OF GOOD STANDING/CERTIFICATE OF PROFESSIONAL CONDUCT

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Please complete the following form and attach any additional forms required from the jurisdiction or organization requesting the Letter of Good Standing. A fee of \$25.00 will apply for any Letter of Good Standing/Certificate of Professional Conduct issued. Please see payment information below. Email COMPLETED REQUEST FORMS TO THE SDHA to [admin@sdha.ca](mailto:admin@sdha.ca)

I \_\_\_\_\_, *(print name)* request a Letter of Good Standing/Certificate of Professional Conduct to be sent to \_\_\_\_\_ *(Province/Jurisdiction/Organization)*.

By Mail: \_\_\_\_\_  
\_\_\_\_\_

By Email: \_\_\_\_\_

*\*For purposes including application for secondary education programs*

This document serves to summarize my registration and license history with the Saskatchewan Dental Hygienists' Association, and will include information relating to my conduct as a dental hygienist in the Province of Saskatchewan for the time I was registered/licensed there.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
dd/mm/yyyy

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**Note: Currently active SDHA members will not be charged the processing fee.**

### **PAYMENT INFORMATION**

1. **CHEQUE/MONEY ORDER:** Please make cheque payable to SDHA in the amount of \$25.00. Mail completed form and cheque to: SDHA, Unit 320 – 350 3<sup>rd</sup> Ave N, Saskatoon, SK S7K 6G7.
2. **CREDIT CARD:**
  - **Previously Registered with SDHA:** must call the office to receive access to pay by credit card.