

School of Dentistry
Academic Part-time Teaching Staff – Appointment and Rostering Information

Name:		
Contact Phone Numbers:		
Email Address:		
Qualifications:		
Registered with the Dental Board of Qld:		
Dental Therapists	Yes/No	
Dental Hygienists	Yes/No	
General Registration as a Dentist	Yes/No	
Dental Specialist	Yes/No	
Discipline:		
Special Purpose Registration	Yes/No	

Please tick areas of teaching you would like to be involved in:

	Yes/No		Yes/No
General Dental Practice		Orthodontics	
Endodontics		Prosthodontics – Fixed	
Oral Surgery		Prosthodontics – Removable	
Periodontics		Dental Therapy Practice	
Dental Hygiene Practice		Oral Biology/Biomedical Sciences (non-clinical)	
Dental Public Health (non-clinical)			

Times you could be available for teaching

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning session: usually 9:00 am - 12:00 pm					
Afternoon session: usually 1:00 - 4:00pm					

How many sessions would you be willing to do in a week? _____

Please email the completed form to: j.brandis@uq.edu.au or fax it to 3365 8148.