Dear Prospective Applicant:

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All information and application forms are on our website (http://www.urmc.rochester.edu/dentistry/education/). The site includes the number of available positions for the Academic School Year 2013-14, pertinent information regarding admission/eligibility requirements, a listing of all the Eastman Institute for Oral Health training opportunities and a Q&A segment.

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Important information:

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2. Application deadline: September 1st
3. Stipends, tuition and fees:

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<tr>
<th>GME Residency Programs</th>
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<tr>
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NOTE: In order for graduates of foreign dental schools to be eligible for a GME resident position they must meet specific requirements for licensure as contained in Title 8, Article 133, Section 6604 of New York State Education Law and Part 61 of the Commissioner's Regulations.

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<th>International Postdoctoral Training Programs</th>
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March 25, 2013

Registrar’s Office

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625 Elmwood Avenue Box 683 Rochester, NY 14620 585.273.8315 or 585.275.9801 / 585.276-1244 fax http://www.urmc.rochester.edu/dentistry/
4. Application completion and submission:
   ● Application: Complete, sign and submit the application (http://urmc.rochester.edu/dentistry/education/apply.cfm) directly to EIOH at address noted below. The following items must accompany the application:
     ○ Certification Statement (http://urmc.rochester.edu/dentistry/education/apply.cfm)
     ○ Curriculum Vitae (CV)
     ○ Personal Statement
     ○ 2 x 2 Photo
   ● Application processing fee: The processing fee of $195.00 must be made payable to Eastman Institute for Oral Health via Money Order or Personal Check in US Dollars and received by EIOH prior to the initial review of the application. Please note if paying by personal check it must be drawn on a US bank. The fee is non-refundable and is not credited toward any charges when an accepted applicant registers.
   ● Letters of Recommendation: http://urmc.rochester.edu/dentistry/education/apply.cfm
     ○ Complete the first section of the Letter of Recommendation form.
     ○ Send one (1) form to the Dean of your dental school.
     ○ Send two (2) forms to senior faculty members or other appropriate people.
     ○ Letters of Recommendation may be in the form of a personal letter however the letter must accompany the completed Letter of Recommendation form.
     ○ Letters of Recommendation must be mailed directly back to EIOH at the address noted on the Letter of Recommendation form. Letters of Recommendation will not be accepted if submitted by the applicant.
   ● Additional required supporting documents:
     ○ US/Canadian Dental School Graduates - Official transcripts from your dental school and college must be sent directly to EIOH from the dental school and college. Transcripts will not be accepted if submitted by the applicant.
     ○ Foreign Trained Dental Graduates - Official transcripts from your dental school or college OR Original Educational Credential Evaluators (ECE), World Education Services (WES) must be sent directly to EIOH from the respective service. Transcripts or ECE/WES reports will not be accepted if submitted by the applicant.
     ○ National Board Exam scores: National Board scores must be sent directly to EIOH from the ADA Joint Commission of National Dental Examinations. Board scores will not be accepted if submitted by the applicant.
   ● Mailing address: Registrar’s Office
     C/o Marilyn Foy
     Eastman Institute for Oral Health
     University of Rochester
     625 Elmwood Avenue, Box 683
     Rochester, NY 14620 USA

5. Interview Process: Upon receipt of completed application, processing fees and all other required supporting documents your file will be forwarded to the Prosthodontic Program for review and selection. Interviews are granted once per cycle and will be conducted between September and November of the year preceding the start of the program for which you are applying.

Thank you again for your interest in the Prosthodontic GME Residency and International Postdoctoral Dental Training Program! We look forward to receiving your application.

Sincerely,

Marilyn Foy

Marilyn Foy, Residency Coordinator
Eastman Institute for Oral Health
Email: marilyn_foy@urmc.rochester.edu
Phone: 585-275-8315 / Fax: 585-276-1244