



**UNIVERSITY OF TORONTO
FACULTY OF DENTISTRY**

**Application for Admission
OMFS Clerkship**

APPLICANT INFORMATION

Surname

Given names

Street Number and Name

Apt./Suite No.

City

Province / State

Postal / Zip Code

Area Code + Telephone Number

Email Address

Is there a particular rotation date of the six you prefer?

(Eligible rotations: June 1-12, June 15-26, June 29- July 10, July 13-24, July 27-August 7, August 10-21.)

Student's Signature

Date

Only complete applications will be considered and processed

Please mail complete application to:

ADMISSIONS OFFICE

104-124 Edward Street, Toronto/Ontario/ M5G 1G6/ Canada

Tel: +1 416-864-8113 • <http://www.dentistry.utoronto.ca>



APPLICATION CHECKLIST

Documents to be submitted at the time of application	1. Completed application form.
	2. \$50 CDN application service fee (bank draft or money order, payable to the University of Toronto.) You can also pay online by credit card on the Student Services Payment page .
	3. Official Transcripts (notarized copy accompanied by a notarized English translation, if applicable).
	4. Curriculum Vitae/Resume together with Covering Letter of Intent.
	5. Two letters of recommendation.
Documents to be arranged for once acceptance letter to the program has been received	1. Immunization Record
	2. Current Basic CPR or ACLS Certification
	3. Malpractice Insurance under Canadian University Reciprocal Insurance Exchange /or University of Toronto Risk Management Insurance (applies to non UofT applicants)
	4. Evidence of health insurance (applies to International Applicants)
	5. Externship fee (bank draft or money order, payable to the University of Toronto.) You can also pay online by credit card on the Student Services Payment page

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