### Attachment of Admission Announcement

Higher Graduate Diploma in Clinical Sciences Faculty of Dentistry (International Program)

### FIELD OF STUDY : Oral Surgery and Dental Implant

### Program code Scheme 3867 Applicant with DDS

### **Qualification of Applicants**

- 1. Hold a Doctor of Dental Surgery degree from the University accredited by the Ministry of Education and/or the Dental Council of Thailand.
- Holding the dental license permitted in the country where the applicant graduated.
   Obtain at least one year of working experience in dental practice.
- 3. CU-TEP score of at least 45 or TOEFL PBT/ITP 450 or TOEFL iBT 45 or IELTS score of at least 4.0 taken within 2 years. The examination scores must not exceed more than 2 years since the report date until the announcement of exam results. The test scores must be valid for at least 2 months in order to be approved by the Faculty Executive Committee. (Applicants with CU-TEP score of at least 30 or TOEFL PBT/ITP score of at least 400 or TOEFL iBT 30 or IELTS score of at least 3.0 may be admitted to the program but they have to meet the language proficiency requirement of the graduate school before graduation.)
- 4. Possess qualifications complied with those announced by the Graduate College (to be announced yearly). The Program Administrative Committee reserves the rights to consider other qualifications that deem appropriate to be eligible for admission application.

## Application documents

- Certified copy of degree certificate. A certified copy of academic transcript stating the graduation with Doctor of Dental Surgery degree from the University accredited by the Ministry of Education and/or the Dental Council of Thailand, and any higher degree(s) in dentistry. (Certified copy with applicant's signature is acceptable)
- Result of English Proficiency test taken within 2 years (Certified copy with applicant's signature is acceptable). Applicants who obtain the CU-TEP score less than 30, TOEFL PBT/ITP 400, TOEFL iBT 30, and IELTS less than 3.0 are not considered for admission.
- 3. Copy of identity card or government identification card (Certified copy with applicant's signature is acceptable)
- 4. Certified copy of dental practice permit. (Certified copy with applicant's signature is acceptable).
- 5. At least one reference letter of working experience in dental practices.
- 6. GPAX score most than 2.7
- 7. Interesting topic for research study

# FIELD OF STUDY : Oral Surgery and Dental Implant

| Application period is D                    | ecember 26 <sup>th</sup> 2022 – 31 <sup>th</sup> January, 202 | 23                                   |  |
|--|---|--------------------------------------|--|
| Test Subject                               | Test Date and Time (Bangkok time)                             | Location                             |  |
| Interview                                  | February 13 <sup>th</sup> 2023 / 9.00-12.00                   | Dental 1 Building,                   |  |
|  |   | Faculty of Dentistry                 |  |
| Applicants who do not                      | have a report of English test score and woul                  | d like to take CU-TEP test,          |  |
| please find                                | information and register for the test www.a                   | tc.chula.ac.th                       |  |
| (Please su                                 | Ibmit your report of English test score on Fe                 | eb 6 <sup>th</sup> , 2023.)          |  |
| <ul> <li>Expected Enrollmer</li> </ul>     | nt Number: 4 persons  |                                      |  |
| <ul> <li>Notification of eligit</li> </ul> | ole candidate   |                                      |  |
| for interview                              | Feb 6 <sup>th</sup> , 2023                                    | www.dent.chula.ac.th/grad            |  |
| <ul> <li>Notification of inter</li> </ul>  |   |                                      |  |
| Application procedure                      |   |                                      |  |
| 1. Fill out the online app                 | olication form at www.dent.chula.ac.th/grad Se                | lect topic Register > Admission and  |  |
| Registration New                           |   |                                      |  |
| 2. Pay the application fe                  | e of 1,000 Baht via Kasikornbank Public Compa                 | any Limited, Siam square branch,     |  |
| account number 026-                        | -2-70085-2  |                                      |  |
| 3. Upload all documents                    | within the application deadline (23.59 hrs.).                 |                                      |  |
| ** Submitting false statem                 | ents or falsifying documents is illegal and will I            | result in prosecution of the wrongdo |  |
| If subsequently discovered                 | that the applicant does not meet the require                  | ments or breach of contract or       |  |
| deliberately conceal data,                 | the applicant will be automatically revoked th                | ne right to study at Faculty of      |  |
| Dentistry, Chulalongkorn L                 | Iniversity even if the applicant's name appears               | on the list of successful applicants |  |
| the graduate study, Chulal                 | ongkorn University.   |                                      |  |
|  |   |                                      |  |
| For further information                    | pertaining to applicant's qualifications, please              | contact Mrs.Piyachad Plianchobtham   |  |
|  | Oral & Maxillofacial Surgery, Dental 1 Building,              |                                      |  |

(Signed) .....

(Signed).....

Program Director

Dean of the Faculty of Dentistry