NOTE: The completed DDS Supplemental Application and Application fee must be received by the deadline of June 30, 2021 12pm (PST)

The following two (2) check-listed items are required to complete your supplemental application

[ ] COMPLETED SUPPLEMENTAL APPLICATION FORM
Submit a fully completed supplemental application form (this page included) signed and dated by the individual applying to the program.

[ ] APPLICATION FEE
A nonrefundable application fee of $100 US dollars must be submitted with the supplemental application. A cashier’s check or money order for the application fee should be made payable to “Board of Regents.”

The selected candidate must be ready to immediately submit the following upon notice of invitation in order to secure his or her seat for an interview:

- OFFICIAL COPY OF FOREIGN DENTAL DEGREE (DIPLOMA)
  An official copy of dental degree (diploma) from the applicant’s dental school or equivalent institution must be mailed to UNLV School of Dental Medicine Admissions Office DDS sub-committee either by the applicant’s dental school, or the applicant in the original unopened dental school sealed envelope. If the transcripts are in a language other than English, they must be accompanied by a U.S. certified English translation. Notarized copies are not accepted.

- OFFICIAL COPY OF FOREIGN DENTAL SCHOOL TRANSCRIPT
  An official copy of dental degree transcript (translated into English) from the applicant’s dental school or equivalent institution must be mailed to UNLV School of Dental Medicine Admissions Office DDS sub-Committee either by the applicant’s dental school, or the applicant in the original unopened dental school sealed envelope. If the transcripts are in a language other than English, they must be accompanied by a U.S. certified English translation. Notarized copies are not accepted.

- TECHNICAL SKILLS PRACTICE & TEST FEE
  A nonrefundable dental dexterity practice and test fee of $500 (fee subject to change) is required for candidates invited for this phase of the DDS admissions process. This fee is not applied toward tuition or any other fees.

Mail your Completed Supplemental Application to:
UNIVERSITY OF NEVADA LAS VEGAS
School of Dental Medicine
DDS Program, Office of Student Affairs
Shadow Lane Campus
1001 Shadow Lane MS 7427
Las Vegas NV 89106 4124
SUPPLEMENTAL APPLICATION FORM FOR DDS ADMISSION

CAAPID ID #: ___________

Last Name ___________________________________________ First Name ___________________________ Middle ___________

Name you prefer, nickname, or alias ________________________________________________________________

Date of Birth ___________________________ Male ___ Female ___ Country of Citizenship _____________________________

Type of VISA ___________________________ Expiration Date (month/day/year) _____________________________

Mailing Address ________________________________________________________________

Dates at this Address (from) ___________________________ (to) _____________________________

Permanent Address ______________________________________________________________

E-mail Address _______________________________________________________________________

Day Telephone (___) ______ Evening Telephone (___) _______ __ Fax # (___) _______________________

I certify that the information provided in this application is complete and correct. I understand that if subsequent evidence demonstrating the information I have provided is not complete and correct, it may result in revocation of admission, dismissal from the School, or revocation of degree. I understand that I am responsible for being familiar with and adhering to all academic regulations.

Signature of Applicant ________________________________________ Date ______________________

Disclosure

Applicants are responsible for making sure their applications are completed and received. UNLV Admissions DDS Committee will review only completed applications for interview decisions.

The University of Nevada, Las Vegas School of Dental Medicine does not, expressly or implicitly, guarantee a license to practice dentistry upon admission to or graduation from the program. Licensure is the exclusive right and responsibility of the State Boards of Dentistry in each state. Students must satisfy the requirements of each state’s regulatory body independently of any college or school requirement for graduation.

The University of Nevada, Las Vegas does not discriminate on the basis of age, race, religion, national origin, sex/sexual orientation, veteran and/or veteran of Vietnam era, marital status, or status with regard to public assistance or disability, in admission, employment, or the operation of its educational programs. Inquiries concerning compliance with federal and state laws prohibiting such discrimination should be directed to the University’s Office of Diversity Initiatives.

The tuition of University of Nevada, Las Vegas School of Dental Medicine DDS program for International trained dentist is one fee rate for both in-state and out-of-state students.