

College of Dental Surgeons of Hong Kong

MGD Part II Examination (2017)

Declaration of practice address for Clinic Visitation.

I, _____, declare that the practice address,

_____ ,

which I submitted previously for the MGD Clinic Visitation Exam, is the dental practice where I have been spending the majority of my clinical hours in the 6 months prior to the date of Clinic Visitation in August 2017.

Signature: Date:

Please return to : **College Secretariat**
The College of Dental Surgeons of Hong Kong
Room 902, HKAM Jockey Club Building,
99 Wong Chuk Hang Road, Aberdeen,
Hong Kong
(Deadline : 26 July 2017)