



The College of Dental Surgeons of Hong Kong

香港牙科醫學院

Intermediate Examination Application Form

Last Name (BLOCK letters): _____

Other Names in Full (BLOCK letters): _____

DCHK Registration No.: _____

CDSHK Trainee No.: _____

Full Postal Address: _____

Please attach
photograph here

Contact Phone No.: _____ Facsimile No.: _____

E-mail Address: _____

I wish to enter for the FCDSHK Intermediate Examination in the Specialty of _____

1 Please state your degrees or qualifications and where obtained (with dates)

2 If you hold a surgical or dental Fellowship / Membership of a College, please state title and date

Additional Diplomas _____

3 Please state your Accredited Training Centre(s) and training duration in months

Date _____

Signature _____



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TO BE COMPLETED BY CANDIDATE

Full time (or part time
equivalent) in appropriate posts,
courses & programme of training.

Details of Supervised Training

(i) Institute Stamp

.....
Title of Post
From To
Signature of Consultant or Authorised Officer*

(ii) Institute Stamp

.....
Title of Post
From To
Signature of Consultant or Authorised Officer*

(iii) Institute Stamp

.....
Title of Post
From To
Signature of Consultant or Authorised Officer*

(iv) Institute Stamp

.....
Title of Post
From To
Signature of Consultant or Authorised Officer*

Recommended by

Name of Trainer / Supervisor (s):

(Signature) _____

(Name) _____



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IMPORTANT NOTICE

1. Please return the completed application form with the following documents to *The Secretariat, The College of Dental Surgeons of Hong Kong, Room 902, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong*.
 - Proof of the qualifications;
 - Proof of 30 CME points during Basic Training;
 - A crossed cheque, made payable to “**The College of Dental Surgeons of Hong Kong**” for the amount of Intermediate Examination Fee.
2. The personal data provided will be used by The College of Dental Surgeons of Hong Kong for the following purpose:
 - Proof of eligibility and conduction of examination.
 - Record of examination results and contact of candidates.
 - For preparing statistics.
3. A bounced cheque or payment not honoured would imply the application becoming unsuccessful. An additional 10% surcharge (i.e. HK\$3,000) would be applied for application re-submission.

FCDSHK (Intermediate) Examination

in the Specialty of _____

- I enclose a cheque (Cheque No.: _____, Bank _____) for **HK\$25,000** being the examination fee for FCDSHK (Intermediate) Examination.
- I read and understand all rules and regulations related to the examination and have discussed my application with relevant trainer(s) and Specialty Board member(s).

Name (BLOCK letters) _____

Date _____