



McGill

Faculty of
Dental Medicine and
Oral Health Sciences

Continuing
Dental Education

Faculté de
médecine dentaire et des
sciences de la santé orale

Formation Dentaire
Continue

Forensic Dentistry Course Application Form 2025-2026

MODULES 1, 2, 3, 4

NAME:

Surname First Middle name

MAILING ADDRESS:



Number and Street _____ Apt. _____

City Province/State Country Postal Code

Telephone: Day _____ Evening _____ Cell: _____

Email: _____ Fax: _____

PERMANENT ADDRESS: (if same as mailing address, check here)



Number and Street _____ Apt. _____

City Province/State Country Postal Code

Telephone Number: Day _____ Evening _____

COUNTRY OF CITIZENSHIP _____

DENTAL SCHOOL _____

Degree(s) _____ Year of Graduation _____

Post-graduate Experience _____



LICENSURE

Do you hold a license to practice Dentistry? YES NO

Province/State _____ Country _____

GENERAL

Date of birth: _____
Year Month Day

Male Female Other

Place of Birth: _____

Language normally spoken: English French Other _____

Course Schedule:

WEEKS	DATE	MODULE	FEE
5 Weeks	August 10 - September 13, 2025	Module 1	\$3500.00
7 Weeks	September 14 - November 1, 2025	Module 2	\$4900.00
5 Weeks	November 2 – December 6, 2025	Module 3	\$3500.00
13 Weeks	January 11 – April 11, 2026	Module 4	\$9100.00

THE FOLLOWING SHOULD BE RETURNED ELECTRONICALLY

- A. Forensic Dentistry Application Form, including the signed administrative policy document (*page 3 of the application form*).
- B. A copy of your university dental degree(s)
- C. A copy of your dental license
- D. An abbreviated curriculum vitae
- E. An autobiography letter of application
- F. The confidential reference reports should be sent separately by the two medical/dental colleagues

Submit your Application Form and Documents:

- 1- Once your application fee is paid, please use this [online form](#) to submit the complete application form and our documents.
- 2- The two Confidential Reference Reports must be sent by the person providing the reference, directly to conted.dentistry@mcgill.ca.



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ADMINISTRATIVE POLICY

The application deadline for all Modules is June 1, 2025. Acceptance in the program will be announced by June 15, 2025. The faculty reserves the right to accept applications (or not) after the application deadline.

Applications will be evaluated after the non-refundable application fee of (\$200.00) has been paid online at this link: <https://cvent.me/PALr20>

The 1st semester fee of \$11900.00 (Modules 1, 2 and 3) is due by July 1, 2025.

The 2nd semester fee of \$9100.00 (Module 4) is due by December 1, 2025.

REFUND POLICY

For any cancellation made between the payment due dates and the cancellation deadlines (see below), 90% of the registration fee will be reimbursed. Any refund given will be based on the semester fee.

- The deadline for cancelling your participation for semester 1 (Modules 1, 2 and 3) is **August 1, 2025**, after which date no refund will be given.
- The deadline for cancelling participation for semester 2 (Module 4) is **December 31, 2025**, after which date no refund will be given.

COURSE RESTRICTIONS

McGill University, the Faculty of Dental Medicine and Oral Health Sciences, and the Course Director reserve the right to limit the number of Modules offered in any given year, to cancel a Module, and to restrict the number of registrants in any given Module.

CONFIRMATION

I have a working knowledge of Photoshop / Creative Cloud (Adobe Systems Inc).

SIGNED: _____ **DATE:** _____

Please note that there is a minimum of 15 hours per week of course work for modules 1 to 4. Participants must ensure that they have freed sufficient time in their schedule for the weekly readings, assignments, and chat.

Forensic Dentistry Course

Autobiographical letter of application

LEGAL NAME OF APPLICANT _____

The autobiographical letter must be written by the applicant. The applicant must comply with the following instructions to ensure consideration of the autobiographical letter. It can be up to three pages in length but no longer. The text must be double spaced in "letter" format with one-inch margins in normal lowercase, Times New Roman font, 10 pitch and included in your attachments with your application.

Letters that fail to meet the above criteria will be discarded. The autobiographical application should contain information regarding the applicant's reason(s) for taking the forensic dentistry course. Former forensic education, knowledge, association, or experience should be mentioned.