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Curriculum Vitae for UNLV DDS Program

APPLICANT NAME LAST NAME, First Name

DENTAL DEGREE BDM/BDS,DDS/DMD,Odontology/Stomatology
Dental School Name, City, State/Province, Country
Program Length years
Program starting and ending timefrom Mon /Year to Mon /Year
Degree Conferred Date (Mon / Day/ Year)

ADVANCED DEGREE(S)

(In chronological order, provide any degree (master, doctorate) earned/(anticipate earning) after initial dental degree)

Mon Year –

PUBLICATIONS / PRESENTATIONS / RESEARCH

(In chronological order, provide publication and presentation information during dental school to present, research information performed after earning your initial dental degree)

Mon Year “Article Title” – Publication Title, Country of Publication
Mon Year “Presentation Title” –Presentation Audience/Venue, City, Country
Mon Year “Research Title” –Research Organization, City, Country [Provide a brief summary (max of 2 lines)]

PROFESSIONAL MEMBERSHIP

(In chronological order, provide information about your professional membership after earning your initial dental degree)

Mon Year Name of Dental Association, Country

AWARDS & HONORS

(In chronological order, provide information about awards and honors received from dental school to present)

Mon Year Award Title, School/Association Name, City, Country

CONTINUING DENTAL EDUCATION

(In chronological order, provide continuing dental education information after earning your initial dental degree, or in the past THREE (3) years ONLY)

Mon Year –Mon Year CE Course Title (identify classroom OR online) School/Dental Association Name, City/State/Province, Country