

University of Louisville School of Dentistry
501 S. Preston Street
Louisville, KY 40202

Please complete this form and return to:

University of Louisville School of Dentistry
Dept. of Orthodontics, Pediatrics and Special Care
501 S. Preston Street. Room 362
Louisville, KY 40202

If you wish, you may send completed form electronically to cithom03@louisville.edu.

To be invited for an interview at the University of Louisville School of Dentistry, Division of Orthodontics, applicants must be applying exclusively to programs participating in the Postdoctoral Dental Matching Program. We feel that residency program participation in the Postdoctoral Dental Matching Program is fair and beneficial to applicants. We also believe that Match participation is in the long-term best interest of the orthodontic specialty. Please answer the following question regarding your program application intentions.

Are you applying exclusively to programs participating in the Match?

Yes No

Printed Name

Signature

Date

This form **must** be completed and returned in order to be considered for an interview at the University of Louisville School of Dentistry.

Thank you.