



AMERICA'S PEDIATRIC DENTISTS
THE BIG AUTHORITY on little teeth®

Residency Program Updates

PLEASE ONLY FILL IN INFORMATION THAT NEEDS TO BE UPDATED

If your program information needs to be updated, please submit on the form below: program name and site director name/email and any other changes that you wish to see for your program. Then save and send completed form to Web and Social Media Manager Lily Snyder at lsnyder@aapd.org.

Program Name:

Primary Location Program Address:

Program/Site Director Name:

Primary Phone Number:

Fax Number:

Program Director/Site Director E-mail:

Program Length (months):

Number of Positions Available

Year 1

Year 2

Year 3 (if applicable)

Application Process: (1500 character limit)

Program Description: (2500 character limit)

Program Curriculum: (2500 character limit)

Program Facilities:

Admission Requirements:

Program Strengths

Program Faculty (Include * next to board-certified)

Program Type:

Combined
Certificate

Hospital-based

University-based

Degree

Program Director:

Full-Time

Part-Time

Program Faculty:

Full-Time:

Part-Time:

Board-Certified:

Program Length (months)

Program Start Date:

Program Accreditation:

Approved

Approved (with reporting requirements)

Initial Accreditation

State Licensure:

Required

Restricted License Available

Restrictions:

Number of First Year Positions:

In-State Tuition:

First Year:

Second Year:

Third Year:

Out-of- State Tuition:

First Year:

Second Year:

Third Year:

Program Salary/Stipend

First Year:

Second Year:

Third Year:

Program Fringe Benefits:

Application Fee:

Application Deadline

Participant in National Matching Service:

Yes

No

Participant in PASS:

Yes

No

Only U.S. Citizens from ADA Accredited dental schools considered:

Yes

No

U.S. Citizens from foreign dental schools considered:

Yes No

Non-U.S. Citizens from ADA Accredited dental schools considered:

Yes No

Non-U.S. Citizens from foreign dental schools considered:

Yes No

Applicant Acceptance Ratio:

Clinic Experience:

Orthodontics

Conscious Sedation

Hospital Rotations

General Anesthesia

Emergency Call

Operating Room

Oral Surgery

Infant Oral Health

Medically Compromised

Mentally Disabled

Craniofacial Disorders

Physically Disabled

Community Clinics

Outreach

Public Health

Minimal and Moderate Sedations

Special Health Care Needs

Behavior Guidance

Other (please specify below)

Other Clinical Experience Description if Applicable

Didactic Experience:

Courses

Case Conferences

Lectures

Literature Review

Seminars

Research Requirement:

Thesis

Data Collection Project

Case Report

Teaching Experience:

Clinic Half-Days:

Lecture/Presentation:

Facilities:

Chair/Operatories:

Clinic Receptionists:

Dental Assistants:

Dental Hygienists:

For additional questions or concerns, please contact the Educational Development and Academic Support Manager Leola Royston, M.P.H. at lroyston@aapd.org. To update the information on a residency program, please fill out this form and send it to Web and Social Media Manager Lily Snyder at lsnyder@aapd.org.