

TWEED STUDY COURSE

APPLICATION FOR ADVANCED TRAINING WITH THE EDGEWISE APPLIANCE

DATES OF COURSE:

JUNE 2 - JUNE 12, 2019

The Tweed Study Course is open to qualified orthodontic specialists and to orthodontic graduate students who are enrolled in accredited orthodontic graduate training programs. Proof of qualification to attend may be required.

Last Name	First Name		Application Date
Street Address			
City	State	Country	Postal Zip Code
E-mail Address		Phone	
Accredited Orthodontic Graduate Trainin	g Program		
Graduation Date from Orthodontic Gradu	aate Training Program (or expect	ed graduation date)	
Name of W.F.O. affiliated orthodontic asso	ciation in applicant's country		Month / Year
Are you a member of/eligible for members (This is a requirement for Tweed Study Con		dontic association in you	ır country?
Are you affiliated with a study group?	Where?		
List friends or acquaintances, if any, who h	ave taken the Tweed Study Cour	se or who are members o	of the Charles H. Tweed
International Foundation for Orthodontic F	Research		
Tuition for the Tweed Study Course is \$2,0 of the course may qualify for the student to the U.S. or Canada may qualify for a tuition www.tweedortho.com.	uition of \$1,600. Students who a	re U.S. or Canadian citiz	ens with a relative living in
Applicants are notified of acceptance by Course acceptance, tuition fee, payment Contact us by email at chtweed@aol.com or	instructions, course instruction	ns, and Îhotel accommo	
SUBMIT THIS APPLICATION TO: Tweed Study Course 2620 E. Broadway Blvd. Tucson, AZ 85716 FAX: 520-326-1163 EMAIL: chtweed@aol.com			
Sign below (type for online application) to verify eligibility to attend	the Tweed Study Cou	rse.
"I affirm that I am a specialist in orthoprogram."	odontics or a student in an acc	redited orthodontic gr	raduate training
Name		Date Signed	D. F/2012