TWEED STUDY COURSE

APPLICATION FOR ADVANCED TRAINING WITH THE EDGEWISE APPLIANCE

DATES OF COURSE: September 12 - September 22, 2010

Name_____
Last Name First Name Date Date of Birth

Address_____
Street City State/Country Postal Zip Code

Email Address ___

Phone#_____ Fax#_____

Date of Dental Degree _____ School _____

Orthodontic Graduate Training School _____ Degree _____ Graduation Date _____

Teaching Experience: Where _____ When _____

Name of the recognized orthodontic association in applicant's country _____

Are you a member of the orthodontic association in your country? _____ if not, are you eligible for membership? _____

Are you in exclusive practice of orthodontics? _____

Years in private practice of general dentistry _____ Years in private practice of orthodontics _____

What orthodontic appliances have you used? _____

What appliances do you presently use? _____ Bracket slot size _____

Number of years experience with the Edgewise Appliance _____

Are you affiliated with a study group? _____ Where? _____

Student loans are available to resident students in an accredited orthodontic program; the student must be a U.S. or Canadian citizen. If eligible, do you desire to apply for a student loan? _____ AMOUNT (Maximum allowed is $1,600) _____

List friends or acquaintances, if any, who have taken the Tweed Course or who are members of the Charles H. Tweed International Foundation for Orthodontic Research_____

Tuition for this course is $2,000.00 in U.S. funds. Students enrolled in a recognized graduate orthodontic program at the time of the course may be eligible for a discounted rate of $1,400 to $1,600. This discount depends upon several factors. Please contact us for details. **For cancellations less than thirty days prior to the course, no refund will be made; for other cancellations, a $30.00 processing fee will be assessed.** Classes fill well in advance, so early application is encouraged. Applications are processed in the order in which they are received. Eligible applicants are notified of acceptance and will receive instructions for tuition payment, class preparation, and hotel accommodations.

UPON COMPLETION MAIL OR FAX THIS APPLICATION TO:

Charles H. Tweed International Foundation
2620 E. Broadway Blvd.
Tucson, AZ 85716
U.S.A.
FAX: 520-326-1163
PHONE : 520-326-6002
E-MAIL: chtweed@aol.com

Rev. 4/2009