

**CDC Dental Public Health Residency Program Application  
Academic Year 2014–2015**

**Section 1: General Information**

Applicant Name (first, middle, last):

Current Address:

Phone Number (Residence):

Phone Number (Mobile):

Fax Number:

E-mail:

**Section 2: References**

Names and contact information of the three persons who will write letters of recommendation on your behalf. Letters of recommendation should be sent to the program's Residency Director directly from the persons listed in this section and not by the applicant.

Name:

Address:

Phone Number:

E-mail:

Name:

Address:

Phone Number:

E-mail:

Name:

Address:

Phone Number:

E-mail:

**Section 3: Letter of Intent**

**On a separate page, please describe your reasons for pursuing a career in dental public health and how the residency matches your personal educational goals.**

## **How to Apply**

**Send all application materials below to Residency Director, Barbara Gooch. Materials must be received by the deadline of February 15, 2014.**

- This application form, including a letter of intent.
- Copy of current Curriculum Vitae.
- Official transcripts from both dental school and graduate education in public health. The transcripts must be sent directly from the registrar's office of the issuing institutions. Transcripts from institutions where English is not the official language of instruction must be accompanied by certified translations.
- Three letters of recommendation from persons who have agreed to serve as references. The letters must be sent directly from the persons listed in Section 2, and not by applicants.

In addition to the documents described above, international graduates should submit the following materials:

- Course-by-course evaluation by a credentialing organization for transcripts from educational institutions outside the United States or Canada.
- (TOEFL) score. This is required only from those applicants whose both dental and public health degrees are from institutions with a language of instruction other than English.

### **Residency Director Contact Information**

Barbara F. Gooch, DMD, MPH  
Residency Director, Associate Director for Science  
Centers for Disease Control and Prevention  
Division of Oral Health  
Mailstop F80  
4770 Buford Highway  
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E-mail: OralHealth@cdc.gov

**Thank you for your interest in the CDC Dental Public Health Residency Program.**