



Bachelor of Science in Dentistry Application Form

Name:

Student Number:

Along with this application form, you will need to submit an up-to-date copy of your CV/Resume to dentistry.admissions@usask.ca.

1. Please indicate your first choice for a supervisor/project:

Supervisor Name:

Project title:

I have discussed this project with the supervisor: Yes No

2. Please select between 1 and 2 additional supervisors/projects that you would also consider working with in the event that you cannot be matched with your first choice:

Supervisor Name:

Project title:

I have discussed this project with the supervisor: Yes No

Supervisor Name:

Project title:

I have discussed this project with the supervisor: Yes No



3. **Personal statement:** In the space below, please explain why you would like to be enrolled in the Bachelor of Science in Dentistry program and what you hope to gain from this experience (500 words maximum).