Guy's College Diploma in Implant Dentistry Application Form

To Apply

Complete the application form and email to implantclinic@guysdentaleducation.co.uk or post to Guy's College, 18 Wimpole Street, Marylebone, London, W1G 8GD. All correspondence should be addressed to Dr David Guy.

Full Name and title										
Correspondence Address										
Contact Telephone										
Email address										
GDC Number if UK based										
Qualifications (year and name of institution)										
Practice Address										
Practice Telephone										
Practice Email										
In which country are you a practising dentist?										
Which Diploma Course F	ormat	are you applying for? (t	ick one op	option l	below)					
Where are you based?		UK Dentist					C	Overseas Denti	st	
Prior Experience (if applicable)	Pleas	e briefly give an accoun	t of any re	elevant	t implant e	experience	e you have	2.		
Dental Practice Address, telephone number, and practice email address.										
Are you applying for exemption from the first year of the diploma course? Give details.										
Additional Notes	The diploma in implant dentistry is a part-time two year course held on 20 days approximately once per month for ten months each year. Course days are usually Fridays or Saturdays, but could be other days. Oversease dentists will need to pay the full two year fees in advance. Refunds will not be given for withdrawel from the course as limited spaces are available and are allocated in advance. Overseas dentists are not eligible to treat patients in the UK. The clinical module can be completed inde- pendently.									
DENTAL EDUCATION GUY'S COLLEGI	Ξ									