

ADVANTAGES OF THE 5 YEAR DDS PROGRAM

Fully Approved By The Dental Board Of California, USA

European Dental School Advantages:

- **No SAT Required**
- **No ACT Required**
- **No DAT Required**
- **Apply Right After Graduating From High School**
- **No Bachelor's Degree Required**
- **No College Degree Required**
- **Low Tuition**
- **All Courses are taught in English**
- **Established Dental School**
- ***NEW* Full Approval by the Dental Board of California**

Dear Applicant,

Thank you for your interest in attending the **State University of Medicine and Pharmacy Nicolae Testemițanu of the Republic of Moldova (USMF)**. With great delight we would like to announce that our **dental school** has recently been granted **full approval by the Dental Board of California**. It gives us even greater pleasure to inform you this is the only foreign dental program in the world **taught entirety in English and fully approved by the Dental Board of California**.

What are the advantages of studying in our fully approved English dental program in Moldova?

1. You can apply to the program **right after finishing high school**. No need to spend extra time and money on a college education in order to apply to dental school.
2. All interviews and assessments are **completed in Encino, California**.
3. **No need to travel out of the country** to determine your admittance.
4. The **program is taught in English**.
5. Just like dental students in the United States, you are eligible to take the first part of National Dental Board Exam (**NDB Part 1**) after successfully completing the second year of study and the **NDB Part 2** after successfully completing the fourth year of study.
6. Obtain a license to practice in California during the 5th year of study or after the completion of the USMF English dental program, by taking **the Western Regional Board (WREB) and Ethics** exams.
7. You will be trained for the **required hands-on professional licensure examination, by taking Mock Practice Boards**, while doing your rotation at a school affiliated California-based, dental clinic.
8. You will have a **rich and exciting experience of living in Europe**, traveling and learning new cultures.
9. You will save money, as tuition and living expenses in Europe are much lower.

Thank you for your interest in our Dental Program!

We look forward to seeing you among our students!

DDS PROGRAM FULLY APPROVED BY THE DENTAL BOARD OF CALIFORNIA, USA

- Program Duration: 5 years
- Minimum Education Level Required to Apply: Completion of High School Education (High School Diploma)
- Program Language: English
- Application Deadline: August 15, 2018
- Program Start date: September 15, 2018
- Tuition fee: \$20 000 (per academic year)
- Degree Earned Upon Completion: DDS (Doctor of Dental Surgery)

Applicant's Document Requirements:

Please make sure all the documents are designated only with the name on your valid passport.

1. A completed **Application Form** for the USMFUSA Dental Program in English fully approved by the **California Dental Board**
2. A notarized copy of your **high school diploma**, endorsed with an **Apostille**
3. A notarized copy of your **birth certificate**
4. A notarized copy of your **high school transcript**
5. A copy of your **passport**. The passport must be valid for a period of **not less than one year** from the program start date
6. A **Criminal Background check by a governmental agency** of the applicant's country of residency, endorsed with an **Apostille**
7. A recent **bank statement** proving that sufficient funds (at least \$20 000) are available to pay tuition expenses
8. A letter on a Physician's letterhead confirming that the applicant does not suffer from any communicable diseases that may pose a threat to public health. This medical certificate shall also state the applicant's ABO blood type (including Rh factor)
9. Record of applicant's **vaccination/immunization history**
10. 10 passport size pictures on a white background
11. A completed and signed **Declaration Form**
12. If the applicant is married, a notarized copy of the Marriage certificate
13. If the applicant graduated from a high school outside of the United States, verification of English proficiency is required
14. If available, any other diploma confirming college or university education, endorsed with an **Apostille**
15. Application fee – \$150.00

IMPORTANT:

- All documents shall have notarized translation into English or Romanian, if applicable.
- All the materials shall be submitted to umusa.org@gmail.com. Each document shall be scanned separately into PDF format and attached as a separate file. Each file name shall consist of the Applicant's Last , First Name_Type of document (*Example: << Smith, John_Application Form>>*). Use only the name on your valid passport.
- Application fee shall be paid by check, payable to **University of Moldova.US** and mailed to: **University of Moldova.US, 124 East "F" Street Suite #8 Ontario, CA 91764** . Please mark the memo area of the check with the applicant's name and designate as an application fee (*Example: << Smith, John_Application Fee>>*).
- Applicant must submit original hard copies of electronically submitted documents upon request.

Upon receipt and review of your application, you will be scheduled for an examination to assess your proficiency in basic Biology and Chemistry. An interview will also be conducted.

Disclaimer: USMFUSA reserves the right to modify or change admission standards or requirements at any time without prior notice and effective immediately. The information provided on this site is for informational purposes only and does not create any agreement or understanding or establish any rights or responsibilities whatsoever between USMFUSA and any student or prospective student.



Nicolae Testemitanu State University of
Medicine and Pharmacy of the Republic of Moldova

APPLICATION FORM

The acts permit to be enrolled	
Vice-Rector for International Cooperation	Approved Rector

Please fill in all sections. Type or choose from drop-down lists. Print the form, sign and send the scanned copy.

To: Rector of *Nicolae Testemitanu* State University of
Medicine and Pharmacy of the Republic of Moldova

Mr. Rector,
The undersigned _____
(surname according to the passport) (first name according to the passport)

citizen of _____, passport No. _____
(country)

please approve my enrollment to the first year at *Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of Moldova on a contract base.

Faculty _____, Language of study _____
(select) (select)

Method of applying: _____,
(select) (the name of recruiting company. In case of individual application, leave empty)

Date of birth: _____ sex: _____, marital status _____
(day, month, year) (select) (select)

Height _____ cm, color of eyes _____
(select)

Parent's name: father _____
mother _____

School leaving certificate No. _____, date of issue _____
(day, month, year)

Issued by _____

Permanent address: _____

Tel. _____, email _____

Skype _____, Viber _____

I need hostel accommodation _____

I pledge myself to respect the laws of the Republic of Moldova, university and social norms and regulations. I declare that the statements made by me on this form are, to the best of my knowledge and belief, true and correct.

Date _____
(day, month, year)

Signature of Candidate _____



PUBLIC INSTITUTION
NICOLAE TESTEMITANU STATE UNIVERSITY OF
MEDICINE AND PHARMACY OF THE REPUBLIC OF
MOLDOVA

Page 1 / 1

To the rector
of *Nicolae Testemitanu* SUMPh,
Academician of AS of RM,
PhD, professor,
Ion Ababii

DECLARATION OF RESPONSIBILITY
FOR VERIDITY AND LEGALITY
OF SUBMITTED DOCUMENTS

I, the undersigned, _____
born on _____, resided in _____
(dd.mm.yyyy) (resident address)

holder of the passport series _____ no. _____, personal identification
number _____, declare, under my sole responsibility, that I know the
provisions of art. 352¹ of the Criminal Code of the Republic of Moldova on false testimonies and
confirm, that I have no criminal record on the territory of _____ and, that the
(home country)
documents submitted by me personally, and the personal data provided in the file for admission to
study at *Nicolae Testemitanu* State University of Medicine and Pharmacy of the Republic of
Moldova, are true and legal.

Otherwise, I assume the legal responsibility, in accordance with the legislation in force of
the Republic of Moldova, for the illegal actions committed.

With consideration,

(signature)

(name and surname)

The Criminal Code of the Republic of Moldova no. 985-XV of 18.04.2002

Article 352¹. False testimonies

(1) Declaration not corresponding to the truth, made to a competent body for the purpose of producing legal consequences for oneself or for a third person when, under law or circumstances, the declaration serves to produce such consequences, shall be punished by a fine of up to 950 conventional units or by imprisonment for up to one year, with the deprivation of the right to occupy certain positions or to exercise a certain activity for a period of up to 5 years.

(2) Intentional inclusion of incomplete or false data, intentional non-inclusion of data in the statement of assets and personal interests, shall be punished by a fine in the amount of 400-600 conventional units or by one-year-imprisonment, in both cases depriving a person of the right to occupy certain positions or to exercise a certain activity for a period of 2-5 years.