The **Basic Medical Sciences (BMS)** course highlights subjects that are of importance to the clinical practice of dentistry. Candidates are strongly encouraged to attend the course in preparation for the **Part 1 MDS Examination**.

**BASIC MEDICAL SCIENCES COURSE:**

- Date: 3 to 14 September 2018
- Time: 8.30 am to 6.00 pm

**PART 1 MDS EXAMINATION:**

- Date: 7 to 8 November 2018

Detailed timetable will be provided to registrants upon confirmation.

**EXAMINATION FORMAT:** *(conducted in English)*

1. One essay paper;
2. One multiple-choice question paper; and
3. Oral examinations on:
   - Anatomy and Dental Anatomy
   - Pathology
   - Microbiology
   - Physiology including Biochemistry

**INFORMATION FOR CANDIDATES:**

1. Candidates must possess a degree in Bachelor of Dental Surgery or its equivalent.
2. A pass in the Part 1 MDS Examination is a pre-requisite for application to the **Oral & Maxillofacial Surgery and Orthodontics** residency training programmes leading to the Master of Dental Surgery.
3. With effect from the 2016 MDS Examinations, candidates are eligible to retain passes under the following conditions:
   - Credits for subjects passed will be given to candidates who pass a minimum of 2 subjects on the first attempt.
   - Retention of credits is valid for a maximum period of 2 years from the first attempt.
   - During this period of 2 years, candidates must retake and pass the remaining subjects within one diet of the Part 1 MDS Exam

**TO APPLY:**

Please complete the attached application form and send it to:

Attention: Officer In Charge (BMS/Part 1 MDS Exam)
Division of Graduate Dental Studies, Faculty of Dentistry,
National University of Singapore,
11 Lower Kent Ridge Road, Singapore 119083.

Forms may also be downloaded from our website at [http://www.dentistry.nus.edu.sg/](http://www.dentistry.nus.edu.sg/) or obtained from the DGS office. For further enquires, please contact at: Tel No. (65) 6772 5343/ 5258, Fax No. (65) 6779 6520 or email: denbox2@nus.edu.sg

**REGISTRATION DETAILS:**

<table>
<thead>
<tr>
<th></th>
<th>BMS course</th>
<th>Part 1 MDS exams</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Registration Fees</strong></td>
<td>S$1200.00</td>
<td>S$300.00</td>
</tr>
<tr>
<td>(inclusive of 7% GST)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Withdrawal</strong></td>
<td>Refund (before closing date) will be subjected to 15% administrative fee. No refund after closing date.</td>
<td>No refund</td>
</tr>
<tr>
<td><strong>Closing Date</strong></td>
<td>17 August 2018</td>
<td>28 September 2018</td>
</tr>
</tbody>
</table>

*All information stated is correct at time of printing and subject to change without notice.*
APPLICATION FOR BASIC MEDICAL SCIENCES COURSE &/or PART 1 MDS EXAMINATIONS

Incomplete forms will not be processed. Application form should reach us before closing date.

(A) PERSONAL PARTICULARS

<table>
<thead>
<tr>
<th>Name (Write in BLOCK letters and UNDERLINE surname/family name)</th>
<th>Telephone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr/Mr/Mrs/Mdm/Miss</td>
<td>Pager or Handphone No. (if any)</td>
</tr>
<tr>
<td>Home Address</td>
<td>E-mail address:</td>
</tr>
<tr>
<td>Correspondence Address</td>
<td>Fax No.</td>
</tr>
</tbody>
</table>

Date of Birth (DD/MM/YYYY) | Place of Birth | Domicile (Country you live in permanently) | Passport/NRIC No: |

(B) ACADEMIC QUALIFICATIONS (Please attached certified true copy of relevant certificates).

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
<th>Name &amp; Location of Institution</th>
<th>Certificate/Diploma</th>
</tr>
</thead>
</table>

(C) WORKING EXPERIENCE

(Please list, in chronological order starting with your current job, the jobs you have held after obtaining your bachelor’s degree. Attach separate sheet if necessary)

<table>
<thead>
<tr>
<th>From (mth/yr)</th>
<th>To (mth/yr)</th>
<th>Name &amp; Location of Firm/Organisation (Indicate Department)</th>
<th>Title/Position</th>
<th>Nature of work</th>
</tr>
</thead>
</table>

Signature of Candidate ______________________ Name in Block Letters ______________________ Date ____________

Payment Details: (please indicate below)

- **Cheque/ Bank Draft**
  * Please make cheque/bank draft to ”National University of Singapore”. Write your name, and “BMS” or “Part 1 MDS Exam” on the reverse side of the cheque/bank draft.

  Cheque/Bank Draft No: ______________________
  For the sum of: ______________________

- **Master**
  Name of cardholder: ______________________
  Card No: ______________________
  Expiry Date: ______________________
  Amount: ______________________

- **Visa**
  Name of cardholder: ______________________
  Card No: ______________________
  Expiry Date: ______________________
  Amount: ______________________

  Signature (as shown on card): ______________________ Date ____________