



Application for Oral & Maxillofacial Surgery Internship

Name _____

Email Address _____

Phone Number _____

Required Documentation

- Curriculum Vitae
- Two letters of recommendation – from dental school faculty or current post-grad training program faculty
- Personal Statement
- Part 1 of NBDE performance report. Part 2 (if applicable)
- NBME Comprehensive Basic Science score report
If you have not taken the CBSE, please have your dental school's registrar's office send a letter stating your official class rank and GPA
- Transcripts from undergraduate and dental school

Please send this page and required documentation to:

Email: CMoore09@jpshealth.org

Fax: **817-702-1035** | ATTN: Cortney Moore

Mailing Address:

Department of Oral & Maxillofacial Surgery

ATTN: Cortney Moore
1625 Saint Louis Avenue
Fort Worth, TX 76104

All interns for 2024 - 2025 academic year will be chosen following match in January 2024