GCOI DIPLOMATE APPLICATION

(To be Typed or printed)

Preferred name: _____

(As you wish it to appear on the certificates, directories, etc)

Date of Birth: _____ Gender: _____ Citizenship: _____

Contact information: _____

Mailing address: _____

City: _____ State/Province: _____ Postal code: _____

Phone no: _____ Email address: _____

Educational Background: _____

_____

_____

Dental school Degree(s): _____ Date of graduation: _____

Postgraduate Education (List relevant programs and institutions): _____

_____

_____

Years of clinical experience in dentistry: _____ Years of experience in oral implantology: _____

Current practice type (Solo,group,academic,etc): _____

Professional website or online presence(URL): _____

Country of Licensure: _____ License #: _____

Speciality: _____ AGD #: _____

Number of years a member of the GCOI(membership is necessary) _____

Number of years a fellow of the GCOI(Fellowship status is necessary) _____

Number of years a master of the GCOI _____

Prerequisites: **Active GCOI Membership and Active GCOI Fellowship or GCOI Mastership**

Who can apply: All members who place and/or restore implants. NOTE: You must be currently placing Implants to be eligible for Diplomate status.

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DIPLOMATE REQUIREMENTS

General Practitioner Cases:

• Each applicant must document a minimum of 100 implant cases as a General Practitioner.
• 10 Cases should be performed under supervision, and each case will be awarded 10 points.
• Earn 100 CE hours by completing the entire series of Advanced Modules from Affiliated courses

Specialist Cases:

• Specialists are required to document a minimum of 25 implant cases.
• Similar to the General Practitioner, each case will be awarded 10 points if performed under supervision.
• Earn 20 CE hours by completing the Online Review module

Supervision:

The participant must perform implantation surgery in one of their patients under the direct supervision of an GBOI board of directors.

Part 1 - Written Examination:

Successfully complete the Part 1 Written Examination

Part 2 - Oral Examination:

Completing the Part 2 Oral Examination.

Please use the following coding system to describe your cases on the documentation form:

Type of Implant: Root form—RF, Small diameter—SD, Plate form—PF, Subperiosteal—SP, Narrow Ridge—NRI Type of Restoration: Single crown—SCR, Fixed bridge—FBR, Overdenture—OD, Partial overdenture—POD, Fixed-detachable prosthesis—FDP Current Status: Satisfactory function—SF, Compromised function—CF, Failed & removed—FR, Lost to recall—LR

Diplomate Fee: 1100 Euros

Please note: CREDENTIALS MUST BE AWARDED AT A GCOI SPONSORED OR CO-SPONSORED SYMPOSIUM

Check GCOI website at **https://www.globalcoi.com/** for complete listing
I would like to receive my award at the following GCOI conference:

(please allow 6 weeks for application and certificate processing)

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A separate conference registration form and fee will be required at the meeting where you will be receiving your award.

Dues and payment:
Please visit our website or contact the GCOI office for current membership dues information and payment options.

Declaration:

I understand and agree to abide by the bylaws and code of ethics of the Global College of Oral Implantology, I declare that the information provided in this application is accurate and complete to the best of my knowledge.

Signature: _____ **Date of submission:** _____

Please submit your completed application electronically to **mail@globalcoi.com**

Thank you for your application! We look forward to welcoming you to the GCOI community.

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GCOI DIPLOMATE APPLICATION- CASE DOCUMENTATION FORM

Name: _____ Date: _____

No	Patient's Id/Initials	Maxillary/ Mandibular Arch	Date Implant(s) placed	Type Of Implant	Implant Surgical Dentist/ Implant Brand	Date of Uncovery	Date Restored	Restorative Dentist	Type of Restoration	Dental Lab	Current status

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