Boston University Henry M. Goldman School of Dental Medicine Admissions 635 Albany Street, G-146 Boston, Massachusetts 02118 T 617-358-6827 www.bu.edu/dental/admissions



# **2023 Postdoctoral Program Acceptance Confirmation Instructions**

### Congratulations on your admission into a Henry M. Goldman School of Dental Medicine Postdoctoral Program!

- To accept your offer of admission, complete the enrollment requirements outlined below *on or before the deadline* indicated in your acceptance letter. Your seat in the class will be secured and we will enroll you in the program after GSDM Admissions has verified the timely receipt of both your completed Acceptance Confirmation form *and* your non-refundable tuition deposit.
- Questions? Email Mr. John Flanagan, jgflans@bu.edu and copy postadm@bu.edu.

### Acceptance Confirmation

- ☐ Complete the Acceptance Confirmation form (attached)
  - Print the form on paper, complete and sign it in ink, then SCAN it as a PDF
     or Electronically complete the form, then PRINT it as a PDF (do not Save or Save As a PDF)
  - Name the PDF: [Your Name] [Postdoc Program] Acceptance Confirmation

### ☐ Scan the biographical page of your passport

- Name the scan: [Your Name] Passport
- U.S. citizen without a passport? Scan an official photo identification card (e.g., driver's license).
- International? You must have a valid passport. Your BU student record name must exactly match your passport name.
  - ➤ U.S. Lawful Permanent Residents: also scan both sides of your Alien Registration Receipt Card ("green card")

    Name the scan: [Your Name] Green Card

### ☐ Email your Acceptance Confirmation and Passport scans to Postdoc Admissions

Legible scans must be received by Admissions on or before the deadline indicated in your acceptance letter.

Send to: Mr. John Flanagan, jgflans@bu.edu and copy postadm@bu.edu

Send from: Your PASS application email account

Subject: [Your Name] [Postdoc Program] Acceptance Confirmation

Message: Write a brief message noting the date your tuition deposit was/will be submitted.

Indicate which scanned documents are attached to your email.

☐ Acceptance Confirmation ☐ Passport identification page/s ☐ Green Card (if relevant)

### Tuition Deposit

### ☐ Submit the Postdoc \$3,000 non-refundable tuition deposit

See attached <u>2023 Postdoctoral Program Tuition Deposit Payment Instructions</u>

### ☐ Email payment documentation and the date of your deposit submission

Send to Mr. John Flanagan, Postdoctoral Admissions Manager at <a href="mailto:jgflans@bu.edu">jgflans@bu.edu</a> and copy <a href="mailto:jgflans@bu.edu">postadm@bu.edu</a>.

- Your deposit payment confirmation must be received by GSDM Admissions on or before the deadline indicated in your acceptance letter. Payment documentation examples:
  - Check payment → check image (hiding account and bank codes)
  - o BU Student Accounting Services online payment portal → payment confirmation screenshot
  - o International wire transfer via BU-approved service → funds transfer verification from your bank

### Deposit acknowledgement and program enrollment

- GSDM Admissions will review your Boston University student account after receiving your payment documentation email.
- We will notify you by email when we confirm that your tuition deposit has been posted to your student account.
- Your seat will be secured and we will enroll you in the program after we verify the timely receipt of both your Acceptance Confirmation form and your non-refundable tuition deposit.

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## **2023 Postdoctoral Program Tuition Deposit Payment Instructions**

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### Postdoctoral Program \$3,000 Non-refundable Tuition Deposit

- ☐ Pay your non-refundable tuition deposit through Student Accounting Services
  - Submit the deposit through one of the Student Accounting Services deposit payment options described below.
- ☐ Email payment confirmation documentation to GSDM Admissions and the date of your deposit submission

Send to Mr. John Flanagan, Postdoctoral Admissions Manager at jgflans@bu.edu and copy postadm@bu.edu.

- Your deposit payment confirmation must be received by GSDM Admissions on or before the deadline indicated in your acceptance letter. Indicate the date of your deposit payment, and attach documentation:
  - BU Student Accounting Services online payment portal → payment confirmation screenshot
  - o International wire transfer via BU-approved service → funds transfer verification from your bank
  - Check payment → check image (hiding account and bank codes)

### **Student Accounting Services Deposit Payment Options**

- Payment options are detailed below.
- To ensure that your payment is properly credited to your student account, provide your **name** and **BU ID** (Boston University identification number) from your offer letter (e.g., U00000000 or U00-00-0000)
- If you have the opportunity when making the payment, provide program information: SDM Postdoc Fall 2023

### Student Accounting Services Online Payment Portal – U.S. bank accounts

- Submit the non-refundable tuition deposit from a U.S. bank account online via the BU Student Accounting Services
  payment portal: <a href="http://www.bu.edu/payment">http://www.bu.edu/payment</a>
- Provide your <u>name</u>, <u>BU ID</u> and other required information.
- Save a screenshot of your payment confirmation to email to GSDM Admissions for payment documentation.
- Student Accounting Services portal payment is the fastest method; the payment may be posted the same day.

### > International Wire Transfer – International bank accounts

- Submit the non-refundable tuition deposit from an international bank account via a BU-approved funds transfer service:
  - Flywire http://bu.flywire.com/
  - Western Union Business Solutions https://student.globalpay.wu.com/geo-buyer/bostonuniversity
- Provide your name, BU ID and (if possible) program/semester SDM Postdoc Fall 2023.
- Obtain a funds transfer verification from your bank to email to GSDM Admissions for payment documentation.
- Internationally wired funds may take a week or more to be posted to your student account after you initiate payment.

### Check/Cheque Payment by Mail to Student Accounting Services

■ Make the check payable to <u>Boston University</u>, in U.S. dollars.

Sign the check on the front signature line. Do  $\it not$  write on the back of the

check. Write your <u>name</u>, <u>BU ID</u> and <u>SDM Postdoc Fall 2023</u> on the notes/memo

- Savelime image of the check (hiding account and bank codes) to email to GSDM Admissions for payment documentation.
- Mail the check to Boston University Student Accounting Services for receipt by your deposit deadline:

**Boston University Student Accounting Services** 

25 Buick Street, Suite 130

Boston, MA 02215

Checks are processed within three business days of mail delivery to Student Accounting Services.

### Deposit acknowledgement and program enrollment

- GSDM Admissions will review your Boston University student account after receiving your payment documentation email.
- We will notify you by email when we confirm that your tuition deposit has been posted to your student account.
- Your seat will be secured and we will enroll you in the program after we verify the timely receipt of both your Acceptance Confirmation form and your non-refundable tuition deposit.

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# **2023 Postdoctoral Program Acceptance Confirmation Form**

### Congratulations on your admission into a Henry M. Goldman School of Dental Medicine Postdoctoral Program!

To accept your offer of admission, complete the enrollment requirements *on or before the deadline* indicated in your acceptance letter. Your seat will be secured and we will enroll you in the program after verifying the timely receipt of your completed Acceptance Confirmation form and your non-refundable tuition deposit. Refer to attached 2023 Postdoctoral Program Acceptance Confirmation Instructions and 2023 Postdoctoral Program Tuition Deposit Payment Instructions.

your non-refundable tuition deposit. Refer to attached 2023 Postdoctoral Program Acceptance Confirmation Instructions and 2023 Postdoctoral					
Program Tuition Deposit Payment Instructions.  Print this page to PDF, and Email your Acceptance Confirmation Form to John Flanagan at jgflans@bu.edu and copy postadm@bu.edu.					
Submit official credentials for your Henry M. Goldman School of Dental Medicine record					
Ensure that your official credentials are verified as received and accepted by Admission Satisfactory official documents and NBDE, INBDE, TOEFL, WES and ECE reports submitt Official, final dental school academic transcript indicating the date your dental degree was conferred Official transcripts for undergraduate and advanced degree/s Official NBDE or INDBE Pass results (US-educated dentists, all ENDO)		by <b>April 1, 2023</b> . Official electronic and paper credentials are acceptable.			
Background Check: A satisfactory background check is required for all enrollees; you will receive an email from Certiphi Screening Incorporated.					
International students: prepare materials as early as possible to obtain the required I-20 document  Review requirements on the Boston University International Students and Scholars Office website: <a href="www.bu.edu/isso/graduateadmissiongateway/">www.bu.edu/isso/graduateadmissiongateway/</a> . GSDM Admissions will send you instructions to submit your scanned documents via the Boston University Applicant Gateway "Collect Documents".  International Student Data Form, completed, signed and scanned  PDF, JPEG or PNG of passport information page with full name, photo and passport expiration date  PDF, JPEG or PNG of prior immigration documents, including all prior I-20s, I-94 and visas  Financial documentation as defined in the International Student Data Form, and Financial Sponsorship Certification, if relevant  Print your name exactly as it appears on your passport					
Last name (Family/Surname)	First name				Middle name
Country of citizenship					Date of Birth (mm/dd/yyyy)
☐ US Citizen	Gender		Female		Male
US Lawful Permanent Resident Marital Status Single Married  Permanent address in country of citizenship, if not US citizen or US Lawful Permanent Resident (address cannot be a Post Office box)					
USA address, if USA citizen, US Lawful Permanent Resid	ent, or currently residi	ng in th	ie USA		Address valid until (date)
Email					
Telephone: mobile				PASS#	
Telephone: USA		DENTPIN			
Telephone: international		_		BU ID	
☐ I am enrolling in the following program as specified in my offer of admission (include degree/certificate 2 if applicable):					
	1	admis	ssion (incl	_	
Specialty 1	Degree/Certificate 1	-			gram Duration (in months)
Specialty 2	Degree/Certificate 2				ceptance code
I accept the offer of admission to the Henry M. Goldman School of Dental Medicine Postdoctoral Program as specified in my admission letter and enrollment materials. In accordance with enrollment requirements, I will submit the \$3,000 non-refundable tuition deposit to be credited toward my first semester of enrollment, and provide payment documentation to Admissions.					

Signature Date