PROGRAM DIRECTOR:
- Dr. Steven Lepowsky, Associate Professor, Craniofacial Sciences

PROFESSORS:
- Dr. John Agar, Reconstructive Sciences
- Dr. Robert Aseltine, Oral Health and Diagnostic Sciences
- Dr. Anna Dongari-Bagtzoglou, Oral Health and Diagnostic Sciences
- Dr. Ellen Eisenberg, Oral Health and Diagnostic Sciences
- Dr. Marion Frank, Oral Health and Diagnostic Sciences
- Dr. Martin Freilich, Reconstructive Sciences
- Dr. A. Jon Goldberg, Reconstructive Sciences
- Dr. Gloria Gronowicz, Surgery
- Dr. Arthur Hand, Craniofacial Sciences
- Dr. Marc Hansen, Genetics and Genome Sciences
- Dr. Marja Hurley, Medicine
- Dr. J. Robert Kelly, Reconstructive Sciences
- Dr. Barbara Kream, Medicine
- Dr. Alan Lurie, Oral Health and Diagnostic Sciences
- Dr. R. L. MacNeil, Oral Health and Diagnostic Sciences
- Dr. Mina Mina, Craniofacial Sciences
- Dr. Ravindra Nanda, Craniofacial Sciences
- Dr. Frank Nichols, Oral Health and Diagnostic Sciences
- Dr. Douglas Peterson, Oral Health and Diagnostic Sciences
- Dr. Carol Pilbeam, Medicine
- Dr. Edward Rossomando, Reconstructive Sciences
- Dr. Kamran Safavi, Oral Health and Diagnostic Sciences
- Dr. Thomas Taylor, Reconstructive Sciences
- Dr. Qiang Zhu, Oral Health and Diagnostic Sciences

ASSOCIATE PROFESSORS:
- Dr. Joseph Burleson, Community Medicine and Healthcare
- Dr. Caroline Dealy, Reconstructive Sciences
- Dr. Jacqueline Duncan, Reconstructive Sciences
- Dr. John Harrison, Craniofacial Sciences
- Dr. Efthimia Ioannidou, Oral Health and Diagnostic Sciences
- Dr. Ivo Kalajzic, Reconstructive Sciences
- Dr. Reza Kazemi, Reconstructive Sciences
- Dr. Liisa Kuhn, Reconstructive Sciences
- Dr. Regina Landesberg, Craniofacial Sciences
- Dr. David Pendrys, Oral Health and Diagnostic Sciences
- Dr. Deborah Redford-Badwal, Craniofacial Sciences
- Dr. Ernst Reichenberger, Reconstructive Sciences
- Dr. Blanka Rogina, Genetics and Developmental Biology
- Dr. Patchanee Rungruanganunt, Reconstructive Sciences
- Dr. Flavio Uribe, Craniofacial Sciences
- Dr. Julie Wagner, Oral Health and Diagnostic Sciences
ASSISTANT PROFESSORS:
- Dr. Avinash Bidra, Reconstructive Sciences
- Dr. Taranpreet Chandhoke, Craniofacial Sciences
- Dr. Patricia Diaz, Oral Health and Diagnostic Sciences
- Dr. Yolanda Frontera, Oral Health and Diagnostic Sciences
- Dr. Damon Jenkins, Reconstructive Sciences
- Dr. Nandakumar Janakiraman, Craniofacial Sciences
- Dr. Jin Jiang, Oral Health and Diagnostic Sciences
- Dr. Bina Katechia, Craniofacial Sciences
- Dr. Blythe Kaufman, Oral Health and Diagnostic Sciences
- Dr. Easwar Natarajan, Oral Health and Diagnostic Sciences
- Dr. Aditya Tadinada, Oral Health and Diagnostic Sciences
- Dr. Edward Thibodeau, Oral Health and Diagnostic Sciences
- Dr. Madhur Upadhyay, Craniofacial Sciences

INSTRUCTORS:
- Dr. I-Ping Chen
- Dr. Takanori Sobue
GENERAL GUIDELINES FOR MASTER OF DENTAL SCIENCE CANDIDATES AND ADVISORS
Graduate School's Requirements for Master's Degree
http://grad.uconn.edu/current-students/masters-degree-program/

1. The Master of Dental Science (M.Dent.Sc.) degree program is an interdepartmental program whose primary objective is to provide instruction in dental science that enhances the student's scholarly ability to instruct and undertake research, and may serve as preparation for teaching careers.

2. The M.Dent.Sc. degree is awarded by The University of Connecticut Graduate School located at the main campus in Storrs, Connecticut. Academic regulations for the degree are outlined in the Graduate School Catalog http://gradcatalog.uconn.edu/. It is strongly advised that candidates and Advisory Committees review these regulations.

3. Administration and oversight:
   a. The Senior Associate Dean for Education and Patient Care acts as Program Director for the Master of Dental Science program.
   b. The program is administered by the Advanced Dental and Graduate Education (ADGE) Committee. The ADGE Committee periodically reviews the guidelines and policies of the Master of Dental Science program and reviews research protocols and thesis documents submitted by students in the Master of Dental Science program. These reviews serve to maintain the integrity and scientific merit of the program.
   c. The candidate's research project and thesis are overseen by the candidate's Advisory Committee.

4. There is no departmental jurisdiction within the program because the program is a Graduate School and not a School of Dental Medicine program.

5. The Graduate School requirement for a Master's degree for students matriculating as of the Fall, 1998 semester is a minimum of twenty-four (24) credits at not less than a 3.0 (B) average. Nine (9) of the twenty-four credits should be designated research credits (coded GRAD 5950 or GRAD 5960)*. Six (6) of the twenty-four credits may be accumulated through the candidate's certificate program. The remaining nine (9) credits must be fulfilled through graduate level course work. The major part of the minimum 24-semester hours course work must be related to the student's specific research area. Masters students may enroll for a maximum of 9 graduate credits per semester.

6. In addition to the minimum number of course credits required for the degree, the candidate's Advisory Committee may require the student to take other courses with or without graduate credit, depending on the student's objectives and previous preparation.

7. In the case of students who are graduates of The University of Connecticut, courses taken for an awarded degree may not be taken again for credit or credited to the Plan of Study requirements.

8. The Committee limits the number of students per Major Advisor to two; a major Advisor may take additional concurrent students under some circumstances. The Advisor, in consultation with the student, plans a program of study and research in accord with Graduate School guidelines.

9. Procedures and requirements for entering the program and receiving the degree:
A. Application to and acceptance into the Master of Dental Science Program is independent of student application and acceptance to departmental-based clinical training programs or residencies. The Graduate School has sole responsibility in reviewing and accepting students into the Master of Dental Science Program. The procedure for application to the Master of Dental Science Program is as follows:

i. A student has interest in pursuing a combined Certificate/Master of Dental Science program. Application is first made to the Certificate Program (which involves specialty or residency training) by applying directly to the sponsoring department within the School of Dental Medicine. The student informs the Program Director of the Certificate Program that s/he also wishes to pursue the Master of Dental Science Degree Program.

ii. The Program Director of the Certificate Program indicates approval of the student's application to the Master of Dental Science Degree Program. The approval to apply usually occurs after the student is accepted into the Certificate Program; however, in certain circumstances, approval to apply to the Master of Dental Science Program can be granted earlier (e.g. when acceptance into the Certificate Program is contingent upon acceptance into the Master of Dental Science Program). The Program Director signs the student's application to the Master of Dental Science Program.

iii. The application, accompanied by certified copies of transcripts and required graduate school application fee (independent of the certificate program fee), should be submitted to the Graduate School at Storrs (main campus) for review and acceptance by the Graduate School and subsequently by the respective postdoctoral dental program director. A student who submits his/her application while in a predoctoral program is required to provide a final and complete transcript to the Graduate School upon matriculation. Application information and processes are available online at http://grad.uconn.edu.

iv. The student is notified by the Graduate School of acceptance into the Master of Dental Science Program.

B. If accepted the candidate must complete the following requirements:

i. During the first year of study, the candidate should select an area of research and a graduate faculty member who will serve as her/his major Advisor. The Major Advisor must be a member of the Dental Science Graduate School faculty. Additionally, one of the Associate Advisors must hold a Graduate School faculty appointment.

ii. The Major Advisor in consultation with the student will choose the members of the student’s Advisory Committee. The Advisory Committee will consist of a minimum of three faculty members. The Committee must include the Major Advisor(s), Program Director (if applicable), and a reviewer from outside the candidate’s certificate department and an ex-officio representative from the Office of Dental Academic Affairs. The Advisory Committee should discuss and approve the student’s Plan of Study, and will offer guidance and direction in establishing an academic plan of study beyond the core curriculum required for the program. The composition of the Advisory Committee should be included on the Plan of Study. The Plan must be approved by the Graduate School and submitted during the first year of study designating the 6 credits transferred to the Master’s program from the Certificate program before 12 credits are accumulated. The original plan must be submitted in triplicate (with original signatures of Committee members on all 3 copies) to the Office of the Registrar. Once approved, a copy of this Plan should be submitted to the
Office of Dental Academic Affairs. The plan of study should include the 6 credits transferred to the Master's program from the Certificate Program; a transcript certifying a grade of B or better in transferred courses should accompany the Plan of Study.

iii. The candidate, accompanied by his/her Major Advisor, should hold a Research Protocol Seminar by October 1 of her/his second year. If the Research Protocol Seminar is to be held after October 1, the candidate must seek prior approval by the Advisory Committee. Two weeks before this seminar, the candidate should submit her/his research protocol to each member of the candidate’s Advisory Committee. After the Research Protocol Seminar and upon approval of the Research Protocol by the Advisory Committee, a copy of the Research Protocol and its associated approval form should be forwarded to the Office of Dental Academic Affairs.

iv. Nine months after the Research Protocol Seminar, the Advisory Committee will meet with the candidate, discuss the candidate’s progress, and then submit a progress report to the Office of Dental Academic Affairs.

v. At least three weeks prior to the scheduled thesis defense date, the candidate should submit a copy of his/her thesis to each member of his/her Advisory committee, and to the Office of Dental Academic Affairs. At the same time, the candidate should work with the Office of Dental Affairs to select a defense date and make arrangements for the publication of the date, time, and room location of the thesis defense. The Graduate School (see Graduate School Bulletin) allows a maximum period of six years to complete Master's thesis work.

vi. Students completing the M.Dent.Sc. program must apply for degree conferral via Peoplesoft (Student Admin.). Following the thesis defense, the Major Advisor should submit the Report on the Final Examination Office of the Registrar.

vii. The appropriate forms to be used for some of the requirements are provided in the Appendix.

Continuous Registration

Students in the Master of Dental Science program are required to maintain registration in the Graduate School throughout the course of their program. If students are not enrolled in a Graduate School course during a semester, they must maintain status in the Graduate School through continuous registration via the Registrar’s Office.
Graduate Assistantship Program

The University of Connecticut offers a Graduate Assistantship Program. This one-year award is open to continuing or entering Master’s candidates who must dedicate approximately 20 hours per week to the assistantship. The program offers the recipient a full tuition waiver, health benefits, and an annual stipend. Candidates are nominated for this assistantship by their Program Director. Applications are reviewed by an ad-hoc faculty committee appointed by the Senior Associate Dean for Education and Patient Care, and the selected nominee is presented to the Graduate Programs Committee at UCHC for approval.

Requirement for Instruction in the Responsible Conduct of Research

All Masters candidates must complete the CITI online course on Responsible Conduct of Research, and attend a seminar/discussion class on this topic. The CITI course is available at http://www.citiprogram.org. A seminar/discussion class will be scheduled; the date will be announced.

GUIDELINES for RESEARCH PROTOCOL

One of the requirements for the Master of Science Degree is the conduct of an approved research project intended to demonstrate a high level of student scholarship and ability to conduct independent research, and contribute to the fund of knowledge in the student’s major area of study. While the originality and quality of the research should be above reproach and the scope of the research project should be in keeping with the Master of Science Degree level, the intent of the research project is for the candidate to demonstrate an understanding and competency in the scientific method. Accordingly, the origins of the project should be an observation, either from the laboratory, the clinic or the literature, and move to the development of a testable hypothesis to describe or explain the observation. The protocol should include a description of experiments to test the validity of the hypothesis. It is suggested that the rationale for the experiments be formulated as a prediction: “If the hypothesis is correct then the experiment should produce a result as follows” and the result(s) should be predicted/described. The protocol should include plans for continuing the project should the experiment not produce the expected result.

Completion of the research protocol is divided into several stages: 1) selection of a thesis Advisor; 2) appointment of an Advisory Committee; 3) preparation of a research protocol; 4) presentation of the protocol to Advisory Committee in seminar form; 5) refinement of protocol; 6) final approval of protocol by Advisory Committee; 7) submission of approved protocol to the Office Academic Affairs. Each of the stages is described below.

1. During the first year, the candidate is well advised to select a thesis Advisor with compatible research interests. The candidate may select as an Advisor any full-time faculty member of UConn Health who holds an appointment in the Dental Science Program of the Graduate School.

2. The faculty Advisor, with the consent of the candidate, is responsible for the appointment of the candidate’s Advisory Committee. The Advisory Committee should have, in addition to the advisor, two other members considered experts in the candidate’s field of study, and an ex-officio representative from the Office of Dental Academic Affairs. The thesis advisor will chair the committee and is responsible for calling meetings, keeping minutes and for advising the candidate on preparation of the research protocol.
3. The candidate, with guidance from the faculty Advisor, is responsible for preparation of the Research Protocol. The format for the Research Protocol is described below.

**Format for the Research Protocol**

The protocol should be as complete, but as brief, as possible. The following organization of the research protocol should be used, wherever possible:

A. **Title Page**

B. **Abstract (limit 500 words).** Provide a brief summary of the research study summarizing its specific aims, experimental design, methods, and subject population. This is a concise description that clearly identifies the goals, methods and significance of the project, without references or knowledge of the rest of the proposal.

C. **Table of Contents.** It should list all major parts and divisions (including abstract, even though it precedes the table of contents). Subdivisions usually need not be listed.

D. **Introduction/Observation upon which the project is based**

   1. Objective of research - general statement. Address the overall purpose of the research study. State concisely and realistically what the research described in the protocol is intended to accomplish and/or what hypothesis is to be tested.

   2. Review of the most significant literature with citation and analysis of the most recent work in this field.

   3. Rationale: Brief statement providing justification of the project.

E. **Hypothesis to explain the observation**

F. **Specific Aims/Objectives/Prediction**

   A list of the specific objectives, feasibility of the project in regard to methodology and research materials and description of predicted results.

G. **Research Plan – Experiments designed to test the hypothesis**

   1. Details of the research plan including a description of the experiments or other work proposed. A clear statement must be given of the specific objectives of the project that are attainable within the project time period.

   2. Summarize the experimental design, procedures, and methods that will be used to accomplish the specific aims of the project.

   3. Scientific background: Discussion of the scientific literature and current technology as related to stated objectives and scientific feasibility of the project.

   4. Milestones and Expected Outcomes: A description of the significant points in the project where progress can be documented, and the kinds of data expected.

   5. A justification for the data analysis to be used.

   6. Contingencies: A description of the difficulties foreseen and how these difficulties are to be minimized. Discussion of approaches and experimental options that will be considered if the initial research plan is unsuccessful in evaluating hypotheses or attaining objectives.
H. Significance of the results – do they support the hypothesis?

State the importance of the research project to the overall field. The project proposal should describe the project to be undertaken in sufficient detail to serve as a basis for the project's evaluation. The Advisor and the candidate define the detailed content and format requirements for the proposal.

I. Timetable

A chart or table of the various phases of the protocol must be included, showing the approximate starting and finishing dates for each phase of the proposed work and projected date for submission of documents to the Master's Committee. Include a flow chart of the chronology and approximate timetable for the proposed work by objective. Indicate clearly the work to be accomplished first.

J. Committee Signature Page

The Major Advisor and each member of the Advisory Committee must sign an approval page and this approval page must be inserted behind the title page.

- Federal law and university regulations require students who do research involving human and/or animal subjects to obtain institutional clearance before beginning such research. If human subjects are involved, the Chairman of the Institutional Review Board (Human Experimentation Committee, IRB) must also sign the protocol.

- If animals are used in the research, approval of the Institutional Animal Care and Use Committee (IACUC) must be obtained.

K. Literature Cited

Literature can be listed alphabetically by author or in order of citation in the text. If papers are cited by author(s) and year, they must be listed alphabetically in the Literature Cited section. However, any citation format accepted by a scientific journal that includes all authors, article title, and complete page numbers may be used. Only material or papers that are published or in press should be provided in this section. Theses and dissertations, state and federal documents intended for professional distribution, and peer-reviewed proceedings of meetings generally are acceptable citations.

L. Appendix

Letters of collaboration should be included here, as well as any other supplementary materials that are essential to the plan.

Format for the Research Protocol Seminar

The Seminar is intended as an intensive work-in-progress discussion on the research project with faculty members and interested colleagues.

Prior to October 1 of the second year of the program, the Advisor should schedule a Research Protocol Seminar. The Office of Dental Academic Affairs and the Advisory Committee must approve an
extension beyond October 1. Two weeks prior to this Seminar, the candidate should submit her/his research protocol (see above) to each member of the candidate’s Advisory Committee.

The candidate’s Advisory Committee, fellow M.Dent.Sc. graduate students, and any other interested faculty should attend the Research Protocol Seminar. The format for the Research Protocol Seminar is described below.

The Research Protocol Seminar will consist of a 30-minute oral presentation by the candidate of research that has reached the stage where peer input is valuable in helping the candidate refine the research protocol prior to completing the work. The Advisor should ensure that the Seminar is participatory, and attendees should be encouraged to comment. The oral presentation should include:

1. Title
2. The candidate should touch on a review of literature and rationale, but focus on specific aims and provide a comprehensive experimental design.
3. All materials and methods to be utilized should be described.
4. If available, preliminary data should be presented.
5. A timetable should be discussed briefly.
6. Summary and conclusions with a discussion of potential problem areas.

The oral presentation will be followed by an open 15-minute question and answer period. This open period of discussion will be followed immediately by a closed-door question and answer period (Advisory Committee and candidate only).

1. The corrections to the Protocol, suggested during the Forum by the Advisory Committee and others in attendance, will be reviewed by the thesis Advisor and the candidate. Changes deemed acceptable will be made and a revised version of the Protocol prepared.

2. The revised Protocol will be re-submitted to the Advisory Committee within two weeks after the date of the presentation of the Protocol Forum. If now acceptable, the members of the Advisory committee will return the signed approval sheet within 48 hrs.

3. The approved Research Protocol should be submitted to the Office of Dental Academic Affairs, Room AG030, MC3905. Note that signatures of the entire Advisory Committee are required on the approval page. Further progress depends on approval of the Research Protocol by the Advisory Committee.

**GUIDELINES for ADVISORY COMMITTEE**

**NINE-MONTH PROGRESS REPORT**

1. Nine months after the Research Protocol Seminar, the Advisory Committee will meet with the candidate to discuss the progress of the candidate’s research. The content of this meeting will be at the discretion of the Advisory Committee. The Advisory Committee will then generate a Progress Report, which will be submitted to the Office of Dental Academic Affairs.

2. This report will cover any deviations from the approved research protocol and will state the reasons for the change, the impact on the original research protocol, and the consequence of these changes to the student’s progress.

3. All members of the student’s Advisory Committee must sign the progress report.
4. Questions about changes in the schedule and the projected date of the thesis defense should be addressed.

5. It is highly recommended that at least one additional progress meeting be held nine months after the first nine-month progress meeting. The candidate may request additional meetings with her/his Advisory Committee if desired.

6. A copy of the form to be used for the Progress Report can be found in the Appendix.

GUIDELINES for MASTER OF DENTAL SCIENCE THESIS

A Master's thesis provides a demonstration of a graduate student's ability to explore, develop, and organize materials relating to a specific problem or an applied orientation within a field of study. Responsibility for final content and style rests with the author and the candidate's Advisory Committee.

1. At least three weeks prior to the thesis defense date

A. Print out the Thesis Checklist from the Graduate School website (http://grad.uconn.edu/current-students/forms/)

B. Apply for the degree via Peoplesoft (Student Admin) (see: http://www.peoplesofthelp.uconn.edu/student/st12cs90.html)

C. The candidate will submit her/his thesis to each member of the Advisory Committee.

D. The thesis must be submitted (via e-mail or hard copy) to the Office of Dental Academic Affairs for approval by the Senior Associate Dean for Education and Patient Care. This will be made available to interested faculty members prior to the thesis defense. Although this version need not be of publication quality, it should be as complete as possible.

E. The candidate’s Major Advisor should inform the Office of Dental Academic Affairs in writing regarding the Thesis title, candidate’s name, major Advisor’s name, names of the other members of the Advisory Committee, proposed date/time of the Thesis Defense, and proposed site for the Thesis Defense. The Office of Dental Academic Affairs will issue a defense announcement to School of Dental Medicine Faculty.

Format for the Thesis

The following guidelines for Master of Dental Science thesis apply in addition to those required by the Graduate School: see “Current Students” on the UConn Graduate School web page (http://grad.uconn.edu/current-students/masters-degree-program/)

The thesis text should be divided into the following main subdivisions:

Introduction; comprehensive review of selected literature subdivided if needed into theoretical and procedural areas; general objectives (including a hypothesis); specific objectives, including the immediate research goals; material and methods; results, including statistical evaluation of their validity; discussion of the results, including an analysis of their relevance to the literature surveyed.
in the selected literature review; summary and conclusions, including reasoned statements indicating further useful investigation in the general area of the thesis.

Pilot experiments should be presented as an appendix and cited where necessary in the text of the thesis.

A Master of Dental Science degree candidate must submit, in partial fulfillment of the requirements for the degree, a thesis that consists of:

i. An introduction, a rationale, and literature review for the work described in the thesis.

ii. One or more chapters consisting of presentation of the data (including original artwork and photographs). Alternatively, if manuscripts have been submitted to refereed journals, these manuscripts together with original artwork or photographs, but excluding the bibliography may constitute this section.

iii. A comprehensive discussion chapter.

iv. A concluding chapter that summarizes the results of the paper and critically discusses further considerations arising and further avenues to be investigated should also be incorporated into the thesis.

v. A comprehensive listing of all cited literature should be included.

The format of the thesis must conform to Graduate School guidelines.

2. Thesis Defense

Before the thesis defense, the entire thesis Committee is expected to have read the entire thesis, to provide comments to the candidate, and to give approval for scheduling the public defense. Committee members may meet briefly before the thesis presentation to discuss any issues.

At least three weeks prior to the scheduled oral defense, an Application for Authorization to Schedule a Defense, Master's Thesis form should be completed and submitted to the Office of Dental Academic Affairs. The Application for Authorization requires the signatures of the Major Advisor, Advisory Committee members and Program Director. It provides formal notification that the Program supports the request to proceed with the defense. In addition to the names of Advisory Committee members, the form lists the time, place, and date of the exam. The student and the Major Advisor will select a mutually agreeable time and place for defense of the thesis and work with the Office of Academic Affairs to finalize the date.

A. The Major Advisor will chair the defense and has the responsibility for ensuring proper conduct of the examination, appropriate documentation of the results, ensures that regulations and declared policies of the Graduate School and the program are followed, and that the signatures of endorsement are added to the acceptance page of the thesis following a successful defense. It is expected that the entire Advisory Committee will be present. Other members of the Graduate Faculty are encouraged to attend. It would be appropriate for the thesis Advisor to introduce the candidate with remarks that include a summary of the candidate's professional background and include some personal comments about the candidate.
Format for the Thesis Defense

The Thesis Defense is the culmination of the student's research work. The presentation should be formally organized, and is governed by the regulations of the Graduate School. The student should prepare some means of visual presentation that clearly point out the problem, objectives, approaches and the contributions of the thesis work.

1. The Thesis Defense will take place before all advisory members and invited guests, and will be conducted in a formal manner chaired by the Major Advisor.
2. Before beginning the defense, the Major Advisor will outline the format of the presentation, introduce the candidate, and set guidelines for questions and answers.
3. Following the opening remarks and presentation, the student presents a 45-minute oral presentation consisting of a summary of the problem statement and hypothesis, the methodologies, findings, and implications.
4. The oral presentation will be followed by a 15-minute question and answer period. The Thesis Committee Chair (Advisor) determines who may ask questions and in what order and brings the discussion to a close at the appropriate time. This open period of discussion will be followed immediately by a closed-door question and answer period (Advisory Committee and candidate only). The closed session functions as an oral comprehensive examination in which the candidate is expected to demonstrate both competence in her/his area of emphasis, as well as an ability to relate this competence to allied sub-fields.

B. The Advisory Committee will meet immediately in Executive Session and decide the result of the examination. If satisfied with the Thesis and Thesis Defense, the Advisory Committee will sign the covering memorandum. The result of the Thesis Defense must be sent immediately following the defense to the UCHC Registrar's Office by the Major Advisor. Otherwise, the Advisory Committee will suggest revisions and a mechanism for reevaluation will be outlined by the Advisory Committee prior to adjourning the meeting.

C. Required amendments and corrections to the thesis are to be made by the candidate before the candidate's Advisory Committee signs the face page of the thesis.

D. The Report on the Final Examination for the Master's Degree [http://grad.uconn.edu/current-students/forms/](http://grad.uconn.edu/current-students/forms/), will be signed by the Advisors and sent to the Office of the Registrar at UConn Health.

3. Following the Thesis Defense

A. Following the above approvals, submit the thesis electronically to the UConn Digital Commons ([http://digitalcommons.uconn.edu/gs_theses](http://digitalcommons.uconn.edu/gs_theses)) for archiving and accessibility to other researchers through indexing by various search engines. The procedures for submitting the thesis can be found on the UCHC Library web site ([http://library.uchc.edu/departm/techserv/thesis.html](http://library.uchc.edu/departm/techserv/thesis.html))

B. The Approval page must bear original signatures of each member of the student's Advisory Committee. (Photocopy signatures or “per” signatures are not acceptable.)

Note: If you are planning to publish your thesis research in one or more scientific journals, you should select an embargo period of up to one year (a longer period may be requested) when submitting your thesis to Digital Commons. This will allow you time to prepare a manuscript for submission to the journal. Otherwise, some journals may consider the posted thesis as a prior publication, and may refuse your manuscript on that basis.
| DUE DATES |
|-----------------|-------------------------------------------------|
| **Year 1** | Attend M.Dent.Sc. Orientation meeting, complete CITI Responsible Conduct of Research course, and attend Responsible Conduct of Research seminar |
| **Year 1** | Select research area and graduate faculty member as Major Advisor |
| **Year 1** | With Major Advisor, select members of Advisory Committee |
| **Year 1 and prior to accumulating 12 Graduate credits** | Submit Plan of Study identifying 6 transfer credits to Graduate School and to the Office of Dental Academic Affairs |
| **Two weeks prior to Research Protocol seminar** | Submit Research Protocol to Advisory Committee members |
| **By October 1 of Year 2** | Hold Research Protocol seminar |
| **After research protocol seminar** | Submit copy of Research Protocol and Approval Form to Office of Dental Academic Affairs |
| **Nine months after Research Protocol seminar** | Hold progress meeting with Advisory Committee and submit Progress Report to Office of Dental Academic Affairs |
| **Nine months after progress meeting** | Recommended second progress meeting with Advisory Committee |
| **Three weeks before the Thesis defense** | Submit a final draft of thesis to Advisory Committee; submit thesis defense scheduling form and a copy of the thesis (via e-mail or hard copy) to the Senior Associate Dean for Education and Patient Care. |
| **After May 30** | Apply for degree conferral via Peoplesoft (Student Admin.) |
| **Following thesis defense** | Submit electronic copy of the final version to the UConn Digital Commons. The UConn Health Registrar’s Office will need the date of this submission. |
| | Bring one signed original Approval Page and the Report on the Final Examination to the UConn Health Registrar’s Office. |
| | Bring one signed original Approval Page to the Office of Dental Academic Affairs. |

Appendix A
UNIVERSITY OF CONNECTICUT PLAN OF STUDY FOR THE MASTER'S DEGREE

Available at University of Connecticut Graduate School Website:
http://grad.uconn.edu/current-students/forms/

UNIVERSITY OF CONNECTICUT REPORT ON THE FINAL EXAMINATION FOR THE MASTER'S DEGREE

Available at University of Connecticut Graduate School Website:
http://grad.uconn.edu/current-students/forms/

UNIVERSITY OF CONNECTICUT THESIS CHECKLIST

Available at University of Connecticut Graduate School Website:
http://grad.uconn.edu/current-students/forms/
RESIDENT'S NAME: ________________________________

TITLE OF RESEARCH PROTOCOL: ________________________________

We have reviewed this research protocol which has our approval. We verify that, according to our judgment, the project is well described and sufficiently defined to result in a Master of Dental Science thesis.

Major Advisor Signature: ___________________________ Date: ______________
Print Name: ____________________________________________

Associate Advisor Signature: ___________________________ Date: ______________
Print Name: ____________________________________________

Associate Advisor Signature: ___________________________ Date: ______________
Print Name: ____________________________________________

After approval, student must return this form to the Office of Dental Academic Affairs, AG030, with a copy of the Research Protocol attached.
RESIDENT'S NAME: ____________________________________________________________

RESEARCH PROTOCOL TITLE: __________________________________________________

__________________________________________________________________________

Has there been any deviation from the objectives? If so, describe in detail. ______________

__________________________________________________________________________

__________________________________________________________________________

Is this student on schedule? __________

Projected date of defense: __________

Reviewed by:
Major Advisor Signature: ___________________________________________ Date: __________
Print Name: ______________________________________________________________

Associate Advisor Signature: __________________________ Date: __________
Print Name: ______________________________________________________________

Associate Advisor Signature: __________________________ Date: __________
Print Name: ______________________________________________________________

* The progress meeting should be held approximately 9 months after the Research Protocol Seminar. This completed Progress Report must be turned into the Office of Dental Academic Affairs, AG030, MC 3905.
MASTER OF DENTAL SCIENCE
APPLICATION FOR AUTHORIZATION TO SCHEDULE A DEFENSE, MASTER’S THESIS

RESIDENT’S NAME: __________________________________________________________

RESEARCH TITLE: __________________________________________________________

PROJECTED DATE/TIME OF DEFENSE: _____________________________________

LOCATION: ______________________________________________________________

The candidate has satisfied all members of the Committee that the candidate has fulfilled the intent of the Research Protocol and may begin organizing the data as a thesis.

Major Advisor Signature: ____________________________ Date: ________________

Print Name: ________________________________________________

Associate Advisor Signature: ____________________________ Date: ________________

Print Name: ________________________________________________

Associate Advisor Signature: ____________________________ Date: ________________

Print Name: ________________________________________________

Program Director Signature: ____________________________ Date: ________________

Print Name: ________________________________________________

Please return to the Office of Dental Academic Affairs, AG030, three weeks prior to the scheduled defense.
Appendix E

MASTER OF DENTAL SCIENCE

ADVISORY COMMITTEE REPORT
IN THE EVENT OF DEFICIENCIES

This form will be completed by the Advisory Committee only in the event that serious deficiencies are identified at the time of Thesis Defense. The completed form will be sent to the Office of Dental Academic Affairs, AG030.

RESIDENT'S NAME: ________________________________

THESIS TITLE: ___________________________________

The Advisory Committee has taken the following actions:

________________________________________________

________________________________________________

________________________________________________

Major Advisor Signature: __________________________ Date: ______________________

Print Name: ______________________________________

Associate Advisor Signature: _______________________ Date: ______________________

Print Name: ______________________________________

Associate Advisor Signature: _______________________ Date: ______________________

Print Name: ______________________________________