

PLEDGE

I hereby pledge myself to the highest ethical standards of the practice of orthodontics according to the principles of ethics and the code of professional conduct of the American Dental Association, the American Association of Orthodontists, and The American Board of Orthodontics.

I shall only use the acknowledgement of my status in an honest and forthright manner and in the best interest of my patients and the specialty of orthodontics, and in accordance with the rules of The American Board of Orthodontics.

I further understand and agree that the title to the certificate issued to me by The American Board of Orthodontics shall remain the property of The American Board of Orthodontics.

I fully understand the time-limit of the certification that is clearly delineated on my issued certificate. I agree to desist from my use of the Diplomate and/or certified designation if I choose not to maintain certification by re-examination.

The Board shall have the sole right to determine whether information placed before it is sufficient to constitute grounds for revocation of the certificate. If the Board determines, in its sole and absolute discretion, that the certificate should be revoked, the decision of the Board shall be final, and I agree to surrender the certificate upon order of the Board.

BY CHECKING "I AFFIRM" AND ENTERING MY SIGNATURE BELOW,
I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THESE STATEMENTS
AND I INTEND TO BE LEGALLY BOUND BY THEM.

I Affirm

Please type your signature

Vers. 201505

A copy of all statements will be available to you upon completion of registration.