



# ACADEMY OF DENTAL MATERIALS

## ADM Short Video Award – Submission form

### Applicant Information

Full name:

E-mail address:

Institution/Affiliation:

### Video information

Video title:

Download link for the video file:

*(Please ensure the video is hosted on a stable platform such as Google Drive, Dropbox, or similar. Participants are responsible for hosting and ensuring accessibility of the file.)*

### Applicant declarations

I confirm that I am a current student or post-doctoral member of the ADM (status will be verified).

I confirm that the content of the submitted video is original, scientifically accurate, and complies with ADM guidelines.

I agree to grant the ADM full rights to use and share the submitted material, including video and image rights, for promotional and educational purposes.

I acknowledge that AI tools were used only for editing and subtitling, and that narration and content creation were performed by me.

Date: