



Scholarship Application

Requirements:

- A graduating high school senior who will pursue a post-secondary degree.
- Minimum cumulative GPA of 3.0
- Current or former patient of Dean Orthodontics or Dr. Brent Harris.

Student Name: _____

Date of birth: _____

Address: _____

City: _____ Telephone: _____

Email: _____

High School: _____ GPA: _____

Extra-curricular activities: _____

Community/Volunteer activities: _____

Name of college/school attending: _____

Field of study: _____

Future career plans: _____

How did you hear about the Dean Orthodontic Scholarship? (Teacher, School Counselor, Dean Orthodontics Employee, Dean Orthodontics patient)



Student and/or Parental Consent:

There are several opportunities for recognition of the student and Dean Orthodontics. We would like to celebrate the student recipient at our office by taking a photo with Dr. Dean. This photo may be used publicly including, but not limited to our website and social media.

I give approval for my child to be photographed for the Dean Orthodontics Scholarship, understanding that the photo will be posted on Deanortho.com and Facebook/Instagram for student recognition.

Parent/Guardian Signature: _____

Date: _____

I certify that the information in the application is true, complete, and correct to the best of my knowledge. I understand that this information is confidential and subject to verification by Dean Orthodontics.

Student Signature: _____

Date: _____



Dean Orthodontics will award two
scholarships:

\$1,000 for 1st place

\$250 for 2nd place

Please include a short essay (250 words)
on why you should receive this
scholarship. This may include future
goals. Also, tell us how you chose the
school you are attending.

Please deliver application and essay no
later than April 26th, 2019.

Dean Orthodontics
Attn: April Call
61121 Southgate Road
Cambridge, Ohio 43725

Scholarships will be awarded by May 3rd
2019.