



2012 - 2013
ADHA Institute for Oral Health
Dental Hygiene Scholarship Program

Download application at www.adha.org/institute

Dental Hygiene Students:

Please see pages 3 - 13 for eligibility requirements, a list of available scholarships, and the student portion of the scholarship application. **The deadline date for all applications is February 1, 2012.**

Dental Hygiene Faculty:

Please see pages 14 - 15 for instructions on how to complete the faculty evaluation portion of the student application. This portion of the application must be received by **February 1, 2012** to ensure student eligibility.

Financial Aid Officers:

Please see pages 16 - 17 for instructions on how to complete the Financial Aid section of the student application. This portion of the application must be received by **March 31, 2012** to ensure student eligibility.

Program Directors:

Please see pages 18 - 19 for instructions on how to complete the enrollment and grade point average verification forms necessary for the student application. This portion of the application must be received by **February 1, 2012** to ensure student eligibility.

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Eligibility & Rules

Eligibility Requirements

You are eligible to apply for an ADHA Institute for Oral Health scholarship if:

- You are enrolled in an accredited dental hygiene program in the United States;
- You have completed a minimum of one year in a dental hygiene curriculum prior to receiving an ADHA Institute scholarship award [students entering their first year of dental hygiene school are not eligible, students may be in the process of completing their first year when application is submitted];
- You have a minimum dental hygiene grade point average (GPA) of 3.0 (on a 4.0 scale);
- You are a full-time student during the academic year for which you are applying (e.g. Fall 2012-Spring 2013), unless applying for the Part-Time Scholarship;
- **IF YOU ARE GRADUATING IN THE 2011-2012 ACADEMIC YEAR, YOU ARE NOT ELIGIBLE FOR THIS SCHOLARSHIP. YOU MUST BE A STUDENT IN THE 2012-2013 ACADEMIC YEAR TO APPLY FOR THIS SCHOLARSHIP.**
- As an undergraduate student, you are a student member of the American Dental Hygienists' Association (ADHA);
- As a graduate student, you are a student or active member of the American Dental Hygienists' Association (ADHA), hold an active dental hygiene license, and hold the minimum of a baccalaureate degree; and
- You (through your institution's Financial Aid Office) can document a financial need of at least \$1,500 by using the Free Application for Federal Student Aid. [This is not required for students solely interested in merit-based scholarships. These scholarships will be noted as such in the scholarship listing on pages 4 - 5.]

Program & Application Rules

The ADHA Institute for Oral Health Scholarship Program is a competitive scholarship program. You may be eligible to receive an award if you meet all of the above program requirements. If you are unsure of your eligibility, please contact ADHA Institute staff directly. All application forms and materials specified must be postmarked or received by the ADHA Institute no later than February 1, 2012. As the applicant, it is your responsibility to ensure that all materials are completed and mailed successfully. (Please refer to the instructions in each application section for further information on how to correctly complete the forms.) To ensure that your materials have been received prior to the application deadline, please contact ADHA Institute staff via telephone (312) 440-8904 or e-mail (institute@adha.net).

As the applicant, you will choose one scholarship to apply for during this process (e.g. ADHA Institute Minority Scholarship). Please choose the one scholarship for which you are most qualified. Students who choose more than one scholarship on the forms below may be rendered ineligible.

The ADHA Institute suggests that **prior to April 1st** you complete and submit the FAFSA (if required), complete the applicant section of the scholarship application, and provide the appropriate application sections to your Financial Aid Office, faculty evaluator, and Program Director in order to allow sufficient time for the application to be compiled.

Scholarship Listing

Scholarships are awarded based on how well the applicant demonstrates the goal or achievement described. **AWARDING OF SCHOLARSHIPS IS STRICTLY DEPENDENT UPON AVAILABILITY OF FUNDS AND ADHERENCE TO ELIGIBILITY CRITERIA.** Below is a listing of all ADHA Institute scholarships available for the 2012-2013 academic year. All awards range from \$1,000 - \$2,000.

General Named Scholarships

Carol Bauhs Benson Memorial Scholarship (dependent on funding) - Established in memory of Carol Bauhs Benson, this scholarship is awarded to students at the Certificate/Associate educational level who reside in the following states: Minnesota, North Dakota, South Dakota or Wisconsin. Applicants must possess a minimum grade point average of 3.5 on a 4.0 scale.

Wilma E. Motley Scholarship (dependent on funding) - Established in honor of Wilma E. Motley, this scholarship is awarded to applicant(s) pursuing a Baccalaureate degree at an accredited dental hygiene program. Applicants must possess a minimum grade point average of 3.5 on a 4.0 scale.

Irene Woodall Graduate Scholarship (dependent on funding) - This scholarship is awarded to an applicant pursuing a Masters degree in dental hygiene or a related field. Applicants must have a minimum grade point average of 3.5 on a 4.0 scale.

Specific Named Scholarships - funded by private parties, individually selected by applicants.

Cadbury Community Outreach Scholarships (dependent on funding) - Sponsored by Cadbury, these scholarships are awarded to students at the certificate/associate and baccalaureate educational levels who display a commitment to improving the oral health within their community. (Requires separate essay.)

Colgate “Bright Smiles, Bright Futures” Minority Scholarships (dependent on funding) - Sponsored by the Colgate Palmolive Company, these scholarships are awarded to members of minority groups currently underrepresented in dental hygiene programs at the certificate educational level. Example eligible applicants include: African Americans, Hispanics, Asians, Native Americans, and males. Certificate only.

Hu-Friedy/Esther Wilkins Instrument Scholarships (dependent on funding) - Sponsored by Hu-Friedy Manufacturing Co, Inc., these scholarships are awarded to applicants at the certificate/associate or baccalaureate degree level. The program awards recipients with the Hu-Friedy dental hygiene instruments of their choice, equivalent to a retail value of \$1,000.

Dr. Esther Wilkins Scholarship (dependent on funding) - Established by Dr. Esther Wilkins, this scholarship is awarded to applicant (s) pursuing additional degree(s) necessary for a career in dental hygiene education. Applicants must have **completed** an entry-level dental hygiene program. (Requires separate essay.)

Karla Girts Memorial Community Outreach Scholarship (dependent on funding) - Sponsored by Procter & Gamble in memory of Karla Girts, BSDH, RDH, past president of ADHA and former Chair of the ADHA Institute for Oral Health, these scholarships are awarded to students enrolled in an associates, baccalaureate or degree completion program. Applicants will display a commitment to improving oral health within the geriatric population in addition to a cumulative grade point average equal to or above 3.0 on a 4.0 scale. (Requires separate essay.)

Wilma Motley Memorial California Merit Scholarship - A total of three scholarships are available annually to individuals pursuing the following degrees: associate/certificate in dental hygiene, baccalaureate degree, degree completion in dental hygiene, Registered Dental Hygienist in Alternative Practice

(RDHAP), master's or doctorate degree in dental hygiene or related field. Applicants must either be a resident of California or attending a dental hygiene program in California. Applicants must demonstrate leadership experience and have a cumulative grade point average of at least 3.5 on a 4.0 scale. These scholarships will be awarded solely on merit and do not have a financial needs requirement.

Crest Oral-B Dental Hygiene Scholarships (dependent on funding) - Sponsored by Procter & Gamble, these scholarships are awarded to applicants at the baccalaureate degree level who demonstrate an intent to encourage professional excellence and scholarship, promote quality research, and support dental hygiene through public and private education. Applicants must also demonstrate a dental hygiene grade point average of at least 3.5 on a 4.0 scale.

Sigma Phi Alpha Undergraduate Scholarship (dependent on funding) - Awarded to an outstanding Sigma Phi Alpha member pursuing a certificate/associate or baccalaureate degree at a school with an active chapter of the Sigma Phi Alpha Dental Hygiene Honor Society. Applicants must demonstrate a cumulative dental hygiene grade point average of at least 3.5 on a 4.0 scale.

Sigma Phi Alpha Graduate Scholarship (dependent on funding) - Awarded to an outstanding Sigma Phi Alpha member pursuing a graduate degree in dental hygiene or a related field. Applicants must demonstrate a cumulative dental hygiene grade point average of at least 3.5 on a 4.0 scale. (Requires specific Goals Statement and submitted manuscript upon completion of dental hygiene program)

Alice Hinchcliffe Williams, RDH, MS Graduate Scholarship - Funded by the Virginia Dental Hygienists' Association Foundation, this scholarship was created to honor a deceased colleague and benefactor, who enabled the VDHA to establish the VDHA Foundation to serve as the primary provider of life long learning for Virginia dental hygienists. An applicant must be a Virginia resident and seeking a graduate degree in Dental Hygiene or accredited, degree studies related to the professional roles of the dental hygienist.

Student Section

Instructions

All scholarship applications must be typed. Applicant must stay within the space provided. To better enable applicants to accomplish this, the application has been designed as a series of forms. Using Adobe Acrobat or Adobe Acrobat Reader, the applicant can type all pertinent information into the space above each line.

Student Application Section

Please carefully enter all requested information onto the forms. If you have any questions regarding a particular entry, please contact the ADHA Institute staff immediately. When the application is completed, print the form and sign and date it in the “Authorization” section. Please remember that in the “Goals Statement” section of the application you should specifically address how you meet the requirements of the scholarship. Please consult the requirements in the “Scholarship Requirements” section for the specific scholarship you have chosen. Some scholarships may require additional items such as an essay. Further, please remember that you may apply for only one scholarship (check only one box in the “Scholarship Categories” section) and that all application materials must be received by the ADHA Institute on **February 1, 2012**. (Please retain a copy of all student applicant materials for your records.)

Faculty Evaluation Section

This section of the application is to be completed by your faculty advisor or another member of your dental hygiene faculty. However, as the applicant, you are required to complete the first half of this form: applicant information release and scholarship information. Please ensure that you have completed these items before asking the faculty member for her/his evaluation. Also, make sure that the scholarship selected on this form matches that selected in the student applicant section. It is your responsibility to provide the Faculty Evaluator with the form and with a copy of your completed “Goals Statement.” ADHA Institute staff also suggests that you provide the faculty member with a minimum of three to four weeks to complete the form, and that you check on the document’s progress before mailing.

Financial Aid Office Section

If applying solely for a merit scholarship (a scholarship that is based only on academic achievement, rather than financial need), you do not need to complete this section of the application. However, if you are applying for any other type of scholarship, this section must be completed and included with the application to show your specific financial need. As the applicant, you are required to complete the first half of this form: applicant information release. A Free Application for Federal Student Aid (FAFSA) form must be submitted to your state’s Department of Education and its results received by your Financial Aid Office for this section to be completed properly. The ADHA Institute suggests submitting the FAFSA prior to April 1st. Please see your Financial Aid Office for more information on this form. After submitting the FAFSA form, please complete the top section of the “Financial Needs Assessment Form” and visit your institution’s Financial Aid Office to ask their aid in completing the document. The ADHA Institute suggests that you provide the office with a minimum of three to four weeks to complete the form, and that you check on the document’s progress before mailing.

Program Director Section

This section of the application is to be completed by your dental hygiene program director. This individual is responsible for certifying: that you are enrolled in the dental hygiene program, that your grade point average is 3.0 or higher (on a 4.0 scale), and the date you are eligible for or received licensure. However, as the applicant, you are required to complete the first half of this form: applicant information release. ADHA Institute staff suggests that you provide the program director with a minimum of three to four weeks to complete the form, and that you check on the document’s progress before mailing.

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For Institute Use Only

Applicant Information Cont.

E. Honors (last 4 years):

List any honors received (e.g scholastic achievements). **Stay in space provided.**

F. Extracurricular Activities (last 4 years):

List any association work or volunteer activities, including their dates. **Stay in space provided.**

G. Work Experience (last 4 years):

List job type (e.g. hygienist), dates employed, and number of hours worked per week for your three most recent positions. **Stay in space provided.**

Job Type	Dates	Hours

In the next section of the application, you will be provided with the opportunity to express your career goals and professional interests and to meet the written requirements of individual scholarships. All applicants must provide a written “Goals Statement.” Please see the specific instructions on the next page.

Individuals applying for the Cadbury Community Outreach Scholarship, Karla Girls Memorial Community Outreach Scholarship or the Dr. Esther Wilkins Scholarship must also complete a one page essay. **These essays can be found in sections I, J & K.**

Student Application - Page 3

For Institute Use Only

Goals Statement

- H. **All Applicants:** Prepare a statement within the space provided describing: 1) Your long term career goals following graduation; 2) Your intended contribution to the dental hygiene profession; 3) Your professional interests; 4) How your extracurricular activities and your degree enhance the attainment of your goals.

Student Application - Page 4

For Institute Use Only

Specific Scholarship Essay(s)

- I. **Cadbury Community Outreach Scholarship Essay:** Prepare an essay within the space detailing: 1) Your commitment to improving oral health through community service; and 2) Specific examples of community service projects in which you have participated. (Do not complete if you are not applying for this scholarship. Must be completed in addition to the appropriate Goals Statement.)

Student Application - Page 5

For Institute Use Only

- J. **Karla Girts Memorial Community Outreach Scholarship Essay:** Prepare an essay within the space detailing: 1) Your commitment to improving oral health within the geriatric community; and 2) Specific examples of community outreach programs in which you have participated that served geriatric patients. (Do not complete if you are not applying for this scholarship. Must be completed in addition to the appropriate Goals Statement.)

Student Application - Page 6

Specific Scholarship Essay(s)

- K. **Dr. Esther Wilkins Scholarship Essay:** Prepare an essay within the space detailing your commitment to pursuing a career in dental hygiene education. (Do not complete if you are not applying for this scholarship. Must be completed in addition to the appropriate Goals Statement.)

Student Application - Page 7

For Institute Use Only

Applicant Submission

- L. **Scholarship Categories:** Select below the scholarship for which you are applying. **Please remember, applicants may only select *one* scholarship.** If you select more than one scholarship, your application will be voided.

Make sure you meet all requirements for the specific scholarship you select on the application. If you do not meet the requirements, such as GPA, Financial Need, etc., your application will be disqualified. It is recommended that you make a copy of your completed items and request a copy from your Faculty Evaluator, Program Director, and Financial Aid Officer.

	Scholarship Name	Number Available
<input type="checkbox"/>	Carol Bauhs Benson Memorial Scholarship	Dependent on funds
<input type="checkbox"/>	Wilma E. Motley Scholarship	Dependent on funds
<input type="checkbox"/>	Irene Woodall Graduate Scholarship	Dependent on funds
<input type="checkbox"/>	Cadbury Community Outreach Scholarship	Dependent on funds
<input type="checkbox"/>	Colgate “Bright Smiles, Bright Futures” Minority Scholarship	Dependent on funds
<input type="checkbox"/>	Hu-Friedy/Esther Wilkins Instrument Scholarship	Dependent on funds
<input type="checkbox"/>	Dr. Esther Wilkins Scholarship	Dependent on funds
<input type="checkbox"/>	Karla Girts Community Outreach Scholarship	Dependent on funds
<input type="checkbox"/>	Wilma Motley California Merit Scholarship	Dependent on funds
<input type="checkbox"/>	Crest Oral-B Dental Hygiene Scholarship	Dependent on funds
<input type="checkbox"/>	Sigma Phi Alpha Undergraduate Scholarship	Dependent on funds
<input type="checkbox"/>	Sigma Phi Alpha Graduate Scholarship	Dependent on funds
<input type="checkbox"/>	Alice Hinchcliffe Williams, RDH, MS Graduate Scholarship	Dependent on funds

(Please refer to the “Scholarship Listing” section of the application for more information on each scholarship.)

M. **Applicant Authorization:**

I hereby authorize investigation of all statements contained within this application. I understand that misrepresentation or omission of facts is cause for disqualification. Further, I agree to the eligibility criteria and rules specified in the application and understand that if I do not meet them, my application will be disqualified.

Signature

Date

Faculty Evaluation

Instructions

The applicant named within this form has applied for an ADHA Institute for Oral Health scholarship. Your evaluation of the applicant is requested for use in the selection of scholarship recipients. The two page evaluation form must be postmarked on or before **February 1, 2012** for the student to be considered. The address for submission can be found at the bottom of this page.

Prior to beginning the evaluation form, please request a copy of the applicant's "Goals Statement." This statement is part of the student section of the application and may help you better comment on how the applicant's qualifications relate to her/his stated goals and the scholarship for which she/he is applying. Information on the specific requirements of each scholarship can be found on the ADHA Institute website, located at www.adha.org/institute.

If you are unsure as to whether or not this applicant is eligible for the scholarship program, please feel free to call the ADHA Institute at (312) 440-8904 for verification. In addition, we strongly recommend that you make a copy of this form for your records and for the applicant's personal file. **Please note: failure to completely fill out this form and submit it by the application deadline date will jeopardize the applicant's consideration for the scholarship.**

Evaluation Form

Please complete the information on this page to the best of your ability. **All information should be typed in the format provided.**

Section C of this page requests your personal information, primarily for contact purposes. Section D begins the evaluation portion of the form. In this section, please comment on the applicant's performance within your educational program and her/his current and intended professional development. **Comments must be limited to the space provided.**

Submission Information

Please mail one copy of the form to the address listed below by **February 1, 2012**. **Please sign the back of the envelope containing your evaluation to assure authenticity.**

ADHA Institute for Oral Health
Scholarship Award Program
444 N. Michigan Ave., Ste. 3400
Chicago, IL 60611-3980

Faculty Evaluation Form

For Institute Use Only

A. Degree Program - Student

In the Fall of 2012, I will be enrolled in the following degree program:

- Certificate/Associate Baccalaureate Baccalaureate Degree Master's Doctoral
Completion

B. General Information - Student

Name:

Last

First

Middle Initial

Maiden

C. General Information - Faculty Evaluator

Name:

Last

First

Middle Initial

Credentials

Title:

Institutional Title

Phone:

(Area Code) Number

By signing here, I recognize that the purpose of this document is to provide a fair and representative student analysis and state that the below comments constitute my professional/educational opinion of the student applicant.

Signature: _____

Date: _____

D. Applicant Evaluation - Faculty Evaluator

Please comment on how the applicant's qualifications relate to her/his stated goals and overall student performance as they appear on the Career Goals Statement provided to you by the applicant. Please stay in space provided below.

Financial Aid Verification

Instructions

The applicant named within this form has applied for an ADHA Institute for Oral Health scholarship. In order to consider the student's application, it is necessary to have a Financial Needs Assessment completed. The one page Financial Needs form must be postmarked on or before **March 31, 2012** for the student to be considered. The address for submission can be found at the bottom of this page.

Prior to beginning the evaluation form, please check the status of the student's FAFSA submission. *The ADHA Institute for Oral Health requires that each applicant submit a FAFSA prior to completing this application.* A completed FAFSA will enable you to correctly complete the requested fields within this application form.

If you are unsure as to whether or not this applicant is eligible for the scholarship program, please feel free to call the ADHA Institute at (312) 440-8904 for verification. In addition, we strongly recommend that you make a copy of this form for your records and for the applicant's personal file. Please note: failure to completely fill out this form and submit it by the application deadline date will jeopardize the applicant's consideration for the scholarship.

Financial Needs Form

This section must be completed in order for the application to be processed properly. Please complete the Financial Needs section of this page to the best of your ability.

Section B of this page requests your personal information, primarily for contact purposes. Section C begins the Financial Needs portion of the form. In the first question, please check whether the student has submitted a FAFSA for the 2012-2013 academic year. In the second question, please check whether your office has received a completed FAFSA from the applicant. In the second section, please utilize the information obtained within the FAFSA to complete the requested fields. If you have any questions regarding requested fields (e.g. "Fees"), please feel free to call the ADHA Institute at (312) 440-8904.

***If the applicant's financial information is not available by the deadline, you may use the previous year's financial information to complete this form. However, please indicate this in the comments section of the form.**

****If the student has not submitted FAFSA for the 2012-2013 academic year, the applicant will be rendered ineligible.**

Submission Information

Please mail one copy of the form to the address listed below by **March 31, 2012**:

ADHA Institute for Oral Health
Scholarship Award Program
444 N. Michigan Ave., Ste. 3400
Chicago, IL 60611-3980

Financial Needs Form

For Institute Use Only

A. General Information - Student

Name: _____
Last First Middle Initial Maiden

Mailing Address: _____
Number & Street City State Zip Code

Phone: _____ ID #: _____
(Area Code) Number Social Security Number

To be read and completed by a **Financial Aid Officer** of the applicant's institution:

B. General Information - Financial Aid Officer

Name: _____
Last First Middle Initial Credentials

Title: _____ Phone: _____
Institutional Title (Area Code) Number

By signing here, I recognize that the purpose of this document is to provide the ADHA Institute for Oral Health with the estimated expenses for the applicant listed above, with the intention of showing financial need.

Signature: _____ Date: _____

C. Has the applicant submitted a FAFSA form for the 2012-2013 academic year? If yes, answer the next question. ***If no, the applicant will be rendered ineligible.*** Yes No

Has your office received a completed FAFSA form for the applicant listed above for the 2012 - 2013 academic year? If yes, complete the table below with that information. If no, complete the table with information from 2011-2012. Yes No

Notes:

2012 - 2013 Estimated Applicant Expenses

Tuition		Grants Received (or expected)	
Fees		Estimated Family Contribution (EFC)	
Books		Total Grants + EFC	
Supplies		Overall Financial Need	
Living Expenses		<small>(subtract Total Grants and EFC from Total Expenses)</small>	
Other (including instruments)		<i>Use FAFSA data to complete this form</i>	
Total Expenses			

Program Director Verification

Instructions

The applicant named within this form has applied for an ADHA Institute for Oral Health scholarship. In order to consider the student's application, it is necessary to verify her/his enrollment status, grade point average, and expected graduation date. The one page Verification form must be postmarked on or before **February 1, 2012** for the student to be considered. The address for submission can be found at the bottom of this page.

If you are unsure as to whether or not this applicant is eligible for the scholarship program, please feel free to call the ADHA Institute at (312) 440-8904 for verification. In addition, we strongly recommend that you make a copy of this form for your records and for the applicant's personal file. **Please note: failure to completely fill out this form and submit it by the application deadline date will jeopardize the applicant's consideration for the scholarship.**

Verification Form

The completion of the top half of this page is the applicant's responsibility. She/he must have completed this page and provided it to you before the Verification portion should be completed. **This section must be completed in order for the application to be processed properly.**

Please complete the Verification section of this page to the best of your ability, with necessary consultation with your institution's Registrar or Office of Student Affairs. All information should be typed in a legible font.

If applicant is a graduate student, this form may be completed by general program director (e.g. not dental hygiene). If a specific program director does not exist, please contact ADHA Institute staff for further direction.

Section B of this page requests your personal information, primarily for contact purposes. Section C begins the Verification portion of the form. (As the Program Director of the department in which the applicant is enrolled, the ADHA Institute requires that you verify these required details prior to the application being processed.) In this section, please answer all questions regarding the applicant's enrollment status. In Section D, please answer all questions regarding the applicant's GPA, expected graduation date, and expected licensure data. If you have any questions regarding requested information, please feel free to call the ADHA Institute at (312) 440-8904.

Submission Information

Please mail one copy of the form to the address listed below by **February 1, 2012**:

ADHA Institute for Oral Health
Scholarship Award Program
444 N. Michigan Ave., Ste. 3400
Chicago, IL 60611-3980

Final Checklist

Student Application Section

- Completed, signed, and dated Student section of Application
- Made copy of Goals Statement to provide to Faculty Evaluator
- Made copy of all Student section materials for personal record

Faculty Evaluation Section

- Completed, signed, and dated Faculty Evaluation section
- Made sure to select correct scholarship on 1st page of section
- Provided Faculty Evaluation form, its directions, and your Goals Statement to faculty member
- Provided mailing instructions and deadline information to faculty member
- Requested copy of Faculty Evaluation section materials for personal record

Financial Aid Verification Section (Not necessary if applying solely for merit scholarship)

- Completed, signed, and dated Financial Aid Verification section
- Made sure to complete and submit FAFSA form
- Provided Financial Aid Verification form and its directions to Financial Aid Office
- Provided mailing instructions and deadline information to Financial Aid Office
- Requested copy of Financial Aid Verification section materials for personal record

Program Director Verification Section

- Completed, signed, and dated Program Director Verification section
- Provided Program Director Verification form and its directions to Program Director
- Provided mailing instructions and deadline information to Program Director
- Requested copy of Program Director Verification section materials for personal record

NOTE: It is the applicant's responsibility to ensure that all application materials are postmarked no later than **February 1, 2012 (with the exception of the financial aid form due by March 31st)** or the entire application will be considered incomplete and ineligible for an award.

Contact Information

Questions

Any questions that you have regarding the ADHA Institute Scholarship program or application should be directed to:

Scholarship Phone: (312) 440-8904
Scholarship E-mail: institute@adha.net



Please expect a turnaround time of approximately 1 - 2 days in the answering of your message.

Submission Instructions

To submit your scholarship application, please mail the student section (and have all other individuals mail their respective sections) to the address listed below:

ADHA Institute for Oral Health
Scholarship Award Program
444 N. Michigan Ave., Ste. 3400
Chicago, IL 60611-3980

All applications must be postmarked on or before **February 1, 2012**.

Website Help

The ADHA Institute website is the primary location for applicants to locate and download scholarship materials (e.g. application) and information (e.g. eligibility and scholarship listing). Please visit the Scholarship section of the website to see if your question is answered before contacting Institute staff.

To access the Scholarship section of the website, enter www.adha.org/institute into your browser address window. Then, click on the "Scholarships" link located on the top left menu of the site. In this section of the website, you are provided with access to scholarship eligibility requirements, an application download page, and a listing of all currently available scholarships.

If you have difficulty downloading or completing the scholarship application, please e-mail ADHA Institute staff at institute@adha.net.

Frequently Asked Questions

Eligibility

1. Do I have to be a dental hygiene student to qualify for a scholarship?

Yes, eligible applicants must be student members of the American Dental Hygienists' Association who are currently enrolled in an accredited dental hygiene program to qualify.

2. I'm graduating in May 2012, am I still eligible to apply?

No, Institute scholarships are only available to students who will be enrolled in the following academic year, 2012-2013.

Application

3. Does the application have to be typed?

We ask that all submitted items be typed. Open the application from the website, save the blank document to your computer or a USB drive, then complete the application and save. It is up to the discretion of the Scholarship Review Committee whether or not points will be deducted for handwritten submissions.

4. Can I apply for more than one Institute Scholarship?

No, you may only apply for one Institute scholarship. Please select the scholarship that you are most qualified for.

5. Who completes the Financial Need Form?

The Financial Need Form must be completed by a member of your school's Financial Aid department **after** you've submitted your FAFSA information.

6. Do I need to submit the Financial Need Form if I'm applying for a Merit Scholarship?

No, if you are applying for a merit-based scholarship you do not need to demonstrate financial need.

7. If a scholarship has a higher GPA requirement, does that mean it is a merit-based scholarship?

No, the only merit-based scholarships say "merit" in the title of the scholarship. (Example: "ADHA Institute Merit Scholarship").

8. Do I have to send in all application materials at once?

No, the Faculty Evaluation and the Program Verification can be sent in by those faculty members separately. The Financial Need Form should be submitted by your Financial Aid department and has an extended due date of March 31, 2012.

Important Considerations

Scholarship Selection

1. In the past, ADHA Institute Staff has attempted to contact applicants who do not qualify for their selected scholarship. It is the YOUR responsibility to ensure all requirements are met.
2. Once the deadline has passed and all scholarships have been processed, an initial letter of acknowledgment will be sent to all applicants outlining the items received and still outstanding. This will be the ONLY time ADHA Institute Staff will communicate the status of your application before it is sent to the Scholarship Review Committee.

All applicants are welcome to contact staff with any questions.