



TDHA SCHOLARSHIP APPLICATION

INSTRUCTIONS

- **Carefully read all instructions and information in the Scholarship Application Instructions document.** Please follow all instructions and fill out all information to avoid disqualification or point deduction.
- **Check the *SPECIFIC SCHOLARSHIP ELIGIBILITY & CRITERIA* of the Application Instructions to insure you meet the requirements of this scholarship!**
- Please type or print in black ink.
- Responses to short answer questions **MUST** fit on one 8½" X 11" sheet of paper. You may use the back.
- Include one completed TDHA Scholarship Faculty Assessment Form that is sealed in an envelope and signed over the flap.
- Include an original photograph of yourself no larger than 5" x 7" with the application.

SHORT ANSWER

1. Why is it important to be a member of your professional organization?
2. List any Student Chapter of ADHA activities you have participated in or led.
3. List any local component, state or national association activities in which you have led or participated.
4. How will you influence your future colleagues to join their professional organization?



TDHA SCHOLARSHIP RECOMMENDATION FORM

INSTRUCTIONS

- The faculty member, SADHA Advisor, or local or state component mentor most familiar with the student should fill out this form.
 - Take time to answer these questions thoroughly as faculty & mentor input is very important
 - Please type or print in black ink.
 - Responses to short answer questions MUST fit on one 8½ X 11" sheet of paper. You may use the back.
 - **PLACE COMPLETED FORM IN AN ENVELOPE, SEAL THE ENVELOPE, AND SIGN ACROSS THE SEALED FLAP.**
 - Return sealed, signed envelope to student to submit with their application.
 - Please follow all instructions and fill out all information to avoid deductions or disqualification.
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A. APPLICANT INFORMATION

1. Applicant Name: _____
2. School: _____
3. Is this student currently enrolled in an accredited dental hygiene program?
Yes No
4. Applicant's anticipated date of graduation? _____
5. Applicant's GPA (on a 4.0 scale)? _____
6. Is the applicant a Student member of ADHA? Yes No

B. SHORT ANSWER

1. What Student Chapter of ADHA activities has the student been involved in or led?
2. In what local, state, or ADHA activities has the student been involved?

3. Relate any instances known to you of any acts or projects in SADHA or local or state components, or ADHA, which might set them apart from others.

C. FACULTY ASSESSOR INFORMATION

Name: _____

Title: _____

Address: _____

Phone Number: _____

Email Address: _____

Signature _____ Date _____