

**Get-It-Straight Orthodontics
College Scholarship Award
info@get-it-straight.com**

1. **Award Title:** Get-It-Straight Orthodontics College Scholarship Award – Sponsored by Dr. Terry Giangreco, Dr. Ronald Cortese, Dr. Janis Preston, and Dr. Suzanne Cassata.
Purpose or Goal of the Award: this scholarship will be awarded to any patient who donates their time in any area of community service.

2. **Types of schools that qualify for Scholarship:**
 - a. Four Year College or University
 - b. Community college
 - c. Technical/Trade
 - d. Vocational

3. **Criteria for Award:**
 - a. Available to any graduating senior whose current school **does not** already participate in **our** scholarship program. (Fairport, McQuaid, Mercy, Aquinas, Bishop Kearney, Palmyra-Macedon, Penfield, Victor, Gananda, Pittsford Sutherland, Pittsford Mendon, Greece Athena)
 - b. Student must be a **current or previous patient** of Dr. Terry Giangreco, Dr. Ronald Cortese, Dr. Janis Preston, or Dr. Suzanna Cassata who underwent orthodontic treatment (braces with maintenance retainers) in the Pittsford, Palmyra, Greece or Gananda location.
 - c. Student must have a history of community service, in any area that was of benefit to others, or a contribution to society. **Submit a 300 word essay on your contributions in community service and how it has impacted your life. Attach essay to your application form.**
 - d. Include name, address, phone number, and email address on essay submitted for consideration.
 - e. Supply names and phone numbers of **two** advisors who worked with you during your community service
 - f. Submit application to Pittsford office or email to info@get-it-straight.com no later than June 1, 2012.

4. **Individual Award Amount:** One Time Award of \$500.00
 - a. Scholarship will be awarded to **one recipient per year**. This scholarship will be awarded every year until further notice.

Scholarship will be awarded to candidate who most contributed to our community

GET-IT-STRAIGHT ORTHODONTICS

**COLLEGE SCHOLARSHIP
APPLICANT INFORMATION SHEET**

APPLICANT DATA

Name: _____

Permanent Address: _____

Phone Number: _____

Date of Birth: _____

SCHOOL DATA

High School _____

Graduation date _____

Major Field of Study Applicant Plans to Pursue _____

ORTHODONTIC TREATMENT DATA

Office (please circle one): Pittsford Palmyra Gananda Greece

Approximate Patient

Dates: _____

PLEASE ATTACH YOUR 300 WORD ESSAY TO THIS APPLICATION FORM

Applicant's signature:
