



## What a Smile Means to Me

Feldman Orthodontics Scholarship  
Essay Competition

This one time scholarship of **\$1,000.00** was established to recognize an individual with a potential to excel and become a contributing member of our community.

The information below highlights the requirements to be considered for this unique scholarship. Please be sure to fully complete the application, attach your essay and any other information you feel may be helpful to our decision.

### Eligibility

- 1) Graduating high school senior.
- 2) United States Citizen or permanent immigrant.
- 3) Cumulative **State** GPA of at least 2.5.
- 4) An SAT score of 1000 or ACT of 22.
- 5) Letter of acceptance to a community college, vocational-technical, private or public educational institution in or out of the State of Florida.
- 6) Recipient must attend Presentation Dinner.

### Application

Please include all of the following:

- 1) Typed or printed application.
- 2) Transcript Summary Form with GPA, SAT and/or ACT results.
- 3) Letter of reference from a member of the administration or educational staff of your school.
- 4) A one page essay titled "**What A Smile Means To Me**".
- 5) Copy of letter of acceptance from school of choice (see number 5 above).

### Submission Information

- 1) Application must be post marked by **April 13, 2011**.
- 2) Hand carried applications accepted until **April 15, 2011 by 11:00 a.m.**
- 3) Mail to:

**Feldman Orthodontics Scholarship  
Essay Competition  
Attn: Darlene Barmann  
1773 W. Fletcher Avenue  
Tampa, FL 33612-1820  
www.YourBite.com**

## 2011 APPLICATION

Name of Applicant \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

Home phone \_\_\_\_\_ Alternate ph. \_\_\_\_\_

GPA \_\_\_\_\_ High School \_\_\_\_\_

Activities \_\_\_\_\_

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Honors \_\_\_\_\_

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Ambitions \_\_\_\_\_

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Attached credentials:

- Transcript Summary Form with GPA, Sat and/or Act results
- Letter of reference
- "What A Smile Means To Me" Essay
- Copy of letter of acceptance to school of choice

## TRANSCRIPT SUMMARY FORM

*Please have form completed and signed by your guidance counselor.  
Application will not be valid unless complete. Do not send full transcript reports.*

Name of Applicant \_\_\_\_\_

School \_\_\_\_\_

GPA \_\_\_\_\_

SAT Score \_\_\_\_\_

ACT Score \_\_\_\_\_

\_\_\_\_\_  
Signature of Guidance Counselor to verify above information

\_\_\_\_\_  
Printed Name

**School Seal or Stamp:**