



RG Pillar Scholarship Application

Important Information

1. Pillar Scholarship winner(s) will not be eligible to receive this scholarship two years in a row.
2. Sitting members of the NADL Board, NBC Trust, or FDLT Trust are not eligible as individuals to apply for or win grants/scholarships offered through the Foundation.
3. Pillar Scholarship winner(s) who have paid for and successfully completed an examination within 6 months prior to the application deadline may be reimbursed for the exam(s).
4. Pillar Scholarship winner(s) will be required to provide the Foundation with a professional headshot and testimonial (web video submission or typed submission on letterhead paper) about receiving the scholarship and how this experience will positively impact his/her DLT career, prior to funds being released.

Instructions

1. Type or print all answers clearly in ink.
2. Use extra sheets of paper if you need more space for requested information.
3. Be honest, accurate and thorough in completing all sections of this application. The FDLT reserves the right to reject any application if the Board has evidence that the applicant has made a false or misleading statement in the application or any supporting documents.

Applicant Information

Name: _____ Mr./ Mrs. / Ms. / Miss / Other _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Email: _____ Date of Birth: _____

Language Requirement

- a. Do you read, speak and write the English language? • Yes • No

Legal Requirement

- a. Have you been convicted of the illegal practice of dentistry? • Yes • No

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d. Please document any dental laboratory technology related continuing education you have received outside of your normal coursework within the past four years below:

Name of Course: _____ Provider: _____ Year: _____

Name of Course: _____ Provider: _____ Year: _____

Name of Course: _____ Provider: _____ Year: _____

e. Have you previously been awarded a grant or scholarship from the Foundation? • Yes • No

If yes, please list below:

Grant/Scholarship Awarded: _____ Year: _____

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Letter of Interest

On an attached sheet, please compose one typewritten page in response to the following questions:

1. Why is attaining the RG certification important to you?
2. What are your professional goals after graduation and obtaining the RG designation?

Applicant's Affidavit

I understand that by submitting this application, I am expressing my interest in the Foundation's RG Pillar Scholarship and that submitting this application does not guarantee I will be awarded the scholarship.

I understand the Foundation reserves the right to determine the scholarship winners based on specific criteria and that should I be selected; I will comply with the scholarship parameters as set forth by the Foundation.

I understand that by submitting this application, I am giving permission for the Foundation to use any or all of the information contained in my letter of interest, or in my written or video testimonial on their website and other marketing channels.

Applicant Signature: _____ Date: _____

Checklist

- Completed application
- Submitted before the deadline of 3/15 for the spring award date or 9/15 for the fall award date
- Completed and attached Letter of Interest
- Signed Application Affidavit

Foundation for Dental Laboratory Technology

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