



Sterngold Grant Application

Application Deadline: June 1st

Background:

The Foundation for Dental Laboratory Technology (Foundation) is a non-profit 501c (3) organization. The purpose of the Foundation is to advance the profession of dental laboratory technology by addressing industry driven needs and providing solutions that are relevant and accessible to dental technicians and other members of the dental team.

Sterngold Dental, located in Attleboro, Massachusetts, is the leading source for restorative dentistry and is a global leader in alloys, attachments, implants, and restorative systems. Sterngold has kindly pledged \$20,000 to the Foundation in both cash and product donations over a period of time to help support the future of dental laboratory technology. With this donation, Sterngold and the Foundation have partnered to bring you the Sterngold Grant.

Grant Overview:

The Sterngold Grant will award one school \$1,000 in store credit at Sterngold Dental. Visit <https://www.sterngold.com/> for additional information about Sterngold and its products.

This grant will be awarded at the sole discretion of the Foundation Board. The winner will be determined based on the information outlined in this application as well as factors such as other grants awarded, program budget, and program need.

Requirements:

1. In order to be eligible for this grant, an applicant must be an educational institution with a dental laboratory technology program.
2. Grant applications must be received by June 1, 2025 and store credit must be used by June 1, 2026. No extensions will be given.
3. No cash will be provided to the grant recipient. If the recipient fails to use the grant by the deadline, they will forfeit their grant.
4. The Sterngold Grant recipient will be required to provide the Foundation with a headshot or group photo and testimonial (web video submission or typed submission on letterhead paper) about receiving the grant and how this experience will positively impact the dental laboratory technology program, students, and profession.

Instructions:

1. Complete the following information by typing or printing answers clearly in black or blue ink.
2. Use extra sheets of paper if you need more space for the requested information.
3. Applications must be received by the Foundation office by June 1, 2025 to be considered.

Name of Organization: _____

NADL Member # (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Applicant Name: _____ Applicant Title: _____

Program Title: _____

Please explain how you plan to utilize \$1,000 of store credit at Sterngold Dental and how the desired products will enhance education in your dental laboratory technology program and the profession.

Applicant’s Affidavit

I understand that by submitting this application, I am expressing my interest in the Foundation’s Sterngold Grant and that submitting this application does not guarantee I will be awarded the grant.

I understand the Foundation reserves the right to determine the grant winners based on specific criteria and that should I be selected, I will comply with the grant 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 written or video testimonial on their website and other marketing channels.

Applicant Signature: _____ Date: _____

Questions? Contact Lindsey Rowan at (866) 627-3990 or by email at foundation@dentallabfoundation.org.