

GORDON & DESANTIS SCHOLARSHIP PROGRAM

Each year, Gordon & DeSantis Orthodontics provides two (2) \$1000.00 scholarships to graduating high school seniors who are either current or former patients of Gordon & DeSantis Orthodontics.

Scholarship applicants must submit the application and an essay highlighting how your orthodontic treatment has benefited you. The essay must be 500 words or less. The criteria for scholarship selection is based on achievement (3.5 cumulative GPA and combined SAT scores of 1000 and/or ACT scores of 24), leadership, school activities (particularly as it relates to the arts), and service throughout the high school years, along with the essay. These attributes can be represented through school, community, or church activities.



2021 SCHOLARSHIP APPLICATIONS ARE DUE BY MARCH 2, 2021

Please mail or deliver to:

Gordon & DeSantis Orthodontics Gordon & DeSantis Orthodontics

140 Shawnee St. 1930 Prime Ct. Suite 102

Greenville, OH 45331 Troy, OH 45373

Click here to download application

Thank you for taking the time to apply for the Gordon & DeSantis Orthodontics Scholarship. It is a privilege and an honor for us to be able to give back to our orthodontic families, and to reward those students with a drive and desire to make a positive difference in our community and the world. We wish each of you the best of luck in your coming college career and would like to encourage you to never give up on your dreams!

Best Wishes,

Dr. Gordon and Dr. DeSantis

GORDON & DESANTIS ORTHODONTICS SCHOLARSHIP APPLICATION

Applicant's Full Name_	Last Name	First Name	Middle Initial
		THOE IVAINO	madic initial
Applicant's Complete	Address:		
Street Address			
City		State	Zip Code
Phone		E-mail Addre	ess
How did you hear abou	t the Gordon &	DeSantis Scho	larship program?
Date of expected high s	school graduati	on:	
Current high school: _	_		
Current high school Ac			on scale of
SAT scores		scores	
Class Rank			
Attach a copy of your l	high school trar	nscript	
Name of college(s) app	olying to:		

9. List high school extra-curricular activities and include years participated. (Student Government, sports, clubs, arts, drama, etc.).

10.	List public service and community activities you participated in or led in high school and include years participated. (Homeless services, mission work, environmental protection, etc.)
11.	List part-time and full-time jobs held during high school.
12.	What experience have you had participating in the arts?
13.	What is your vision for your future career?

PARENTAL CONSENT

There will be several opportunities for the recognition and publicity of the
recipient. Photos of the presentation may be used in publicity opportunities to
support and recognize the recipient in media press and publications.

I give approval for my son/daughter to be photographed for the Gordon & DeSantis Orthodontics Scholarship Program.

PARENT/GUARDIAN'S SIGNATURE
Date
I certify that the information in the application is true, complete and correct to the best of my knowledge. I understand that this information is confidential and subject to verification by Gordon & DeSantis Orthodontics.
STUDENT SIGNATURE
Date