



**RHODE ISLAND
ORTHODONTIC GROUP**

***2020 Rhode Island Orthodontic Group
College Scholarship***

Rhode Island Orthodontic Group has been a leader in quality orthodontic care in Rhode Island for over 50 years. RIOG recognizes the financial burden of post-secondary education. It is our distinct pleasure to help. Any current or former patient of Rhode Island Orthodontic Group is welcome to apply.

Program

The Rhode Island Orthodontic Group Scholarship recognizes and encourages the academic achievements and extracurricular activities of graduating seniors.

Rhode Island Orthodontic Group will provide two scholarships with an annual award of \$1,500 per year for two years (\$3,000 total). However, the recipient must re-qualify annually to maintain his or her status and receive funds. Award checks will be mailed directly to the college or university.

The Rhode Island Orthodontic Group College Scholarship will be awarded to high school students who have demonstrated academic achievement, leadership skills, and financial need. The award is to be used for education expenses at any accredited post-secondary educational institution for any field of study resulting in an associate's or a bachelor's degree.

The Rhode Island Orthodontic Group College Scholarship awards scholarships without regard to race, color, creed, sex, religion, disability, or national origin.

Eligibility

- Must be a high school senior who will graduate before June 30 of the current school year

- Must be qualified, upon graduation, to enroll at an accredited four-year college or university
- Must have a minimum cumulative GPA of 3.0
- Must ensure that the application, accompanied by the required supporting documents, is postmarked on or before March 1st, 2020
- Must exemplify academic achievement, leadership skills, and college and career potential
- Must write an essay
- Must list family income as shown on IRS tax forms. Must re-qualify each year
- Must have been or is currently a patient of Rhode Island Orthodontic Group

Personal Essay

The scholarship selection committee requires from each applicant an essay. The essay should consist of a challenge, or life changing event, or something passionate about. This is an opportunity to tell the selection committee your story. The essay should be typed, double-spaced, and 250 words or less.

Application Procedure

Applicant should:

- Meet the eligibility requirement.
- Complete and sign the application. A parent or legal guardian signature is also required.
- Attach a current official transcript, as well as two letters of recommendation, including one from a teacher or guidance counselor
- Mail the completed and signed application, official transcript, personal essay, and letters of recommendation to:

Rhode Island Orthodontic Group
c/o Turchetta Orthodontics
1865 Post Road
Warwick, RI 02886

All application materials must be submitted together (two first class stamps are usually required) and must be postmarked on or before March 1st, 2020. Scholarship applicants are responsible for gathering and submitting all necessary information. Scholarship recipients will be notified by mail after May 8th. Applications and materials will not be returned.

Selection Process

The scholarship recipients are selected on the following basis:

- GPA – a minimum cumulative 3.0
- Personal essay
- Extracurricular activities, volunteer community services, part or full-time work experience
- Letters of recommendation
- Financial need

Note

Rhode Island Orthodontic Group reserves the right to change or discontinue this program without notice.

The selection of scholarship recipients will be influenced by the completeness of replies, neatness, legibility, proper grammar, punctuation, composition, and spelling on the application form and the essay.

Recipient Obligations

Recipients are required to notify Rhode Island Orthodontic Group of any change of address, school enrollment, or other pertinent information. Recipients are solely responsible for making admission arrangements and fulfilling requirements of enrolling in a full-time course of study at an accredited four-year college or university.

Recipients must enter college as full-time students in the fall term following selection, remain in good academic standing, and pursue a course of study leading to a degree.

Personal Information

Name of Student _____
Last First MI

Mailing Address _____
Number/ Street

_____ City State zip

_____ Home Phone Cell Phone

_____ Email Address Affiliated RIOG Office

High School Data

<u>Name of School</u>	<u>City/ State</u>	<u>Dates of Attendance</u>	<u>Expected Graduation</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Cumulative GPA (on a 4.0 scale) _____ SAT/ACT _____
Class Rank _____ Please attach official transcript

College Data

List of Colleges to which you are applying or have been accepted:

What major would you declare or undecided? _____

Do you have any plans to attend graduate or professional school? _____

Clubs

<u>Program Name</u>	<u>Grade(s)</u>	<u>Position Held</u>

Activities

<u>Activities/ Type of Work</u>	<u>Years</u>	<u>Hours per Week</u>

Financial Data

Data must come from the most recent IRS tax form filed by parent(s) or guardian(s) who claim the applicant as a dependent.

Adjusted Gross Income: _____

Number of family members who will attend college in fall of next year: _____

Parent/ Guardian Occupation(s): _____

Unusual Circumstances: _____

Note: Financial need is one criterion for awarding this scholarship. Information submitted will be maintained in confidence and utilized solely for purposes of analyzing scholarship application.

Checklist

This application becomes valid only when you have submitted all the following in one envelope:

- Completed application form
 - Official transcript
- Two letters of recommendation
 - Copy of SAT/ACT scores
 - Personal essay

We acknowledge that we have read the eligibility requirements that accompany this application. All the information furnished in support of this application is true and complete. Failure to do so shall invalidate this application and shall result in termination of the scholarship.

Signature of Applicant Date

Signature of Guardian Date