

# Application

## 24th Annual Progressive Dental Community Scholarship

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Address \_\_\_\_\_ High School \_\_\_\_\_

\_\_\_\_\_

Please List Participation in Extracurricular or Community Activities:

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

Planned College or University \_\_\_\_\_

Intended major of study \_\_\_\_\_

Please return this application with the following:

- A. High School Transcript
- B. Single page essay describing why candidate should be awarded scholarship
- C. Appropriate Letters of Recommendation (2)

Application Deadline: May 1, 2022

Selection: June 1, 2022

**ENDWELL**

565 Hooper Rd.  
Endwell, NY 13760  
P: 607.754.2273  
F: 607.754.9526

**NORWICH**

101 S. Broad St.  
Norwich, NY 13815  
P: 607.334.8666  
F: 607.334.6662

**MONTROSE**

57 Public Ave.  
Montrose, PA 18801  
P: 570.278.1186  
F: 570.278.7447

**KIRKWOOD**

1113 US Rte. 11  
Kirkwood, NY 13795  
P: 607.722.5464  
F: 607.775.1125

**BINGHAMTON**

51 Front St.  
Binghamton, NY 13905  
P: 607.724.7166  
F: 607.724.7178