

# LaFerla-Wilson Orthodontic Team Scholarship 2024

- Criteria:**
1. Current or Former Patient of LaFerla-Wilson Ortho
  2. Financial Need
  3. Essay

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
High School: \_\_\_\_\_

Proposed Field of Study: \_\_\_\_\_  
School Most Likely to Attend: 1<sup>st</sup> Choice \_\_\_\_\_  
2<sup>nd</sup> Choice \_\_\_\_\_

Extra-Curricular Activities in High School: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work Experience during high school (paid or volunteer work): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Community Involvement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Financial Need:**

Please indicate the approximate family annual income:

\_\_\_\_\_ under \$50,000 \_\_\_\_\_ over \$50,000

Total number of family members living at home: \_\_\_\_\_

Number of dependents in your family currently attending college full time: \_\_\_\_\_

**TO BE FILLED IN BY GUIDANCE COUNSELOR: Deadline April 5th, 2024**

Class Rank at end of Junior Year \_\_\_\_\_ of \_\_\_\_\_ students, Total GPA \_\_\_\_\_

ACT score \_\_\_\_\_ SAT scores \_\_\_\_\_ Signature \_\_\_\_\_

Comments:

As you stand on the brink of your academic journey into higher education, reflect on the experiences and lessons that have shaped your high school years. In 500 words or less, please share a pivotal moment, a challenging obstacle overcome, or a significant achievement that has influenced your personal growth and educational aspirations. In what ways do you envision your college experience contributing to your future goals, and how will the scholarship aid you in this transformative journey?