



Central Maine Smiles Healthcare Professional Scholarship Application

Student Name: _____

Mailing Address: _____

Telephone #: _____

Email Address: _____

High School: _____

Post-Secondary School: _____

Intended Major: _____

This \$300 scholarship is offered by Central Maine Smiles in Dover Foxcroft, Maine to a high school senior attending secondary schooling in the health care field. Applicants are asked to write an essay of a minimum of 300 words explaining why they are choosing to go into the health care field.

Please mail this application and your essay to:

Central Maine Smiles
5 Winter Street
Dover Foxcroft, ME 04426
ATTN: JOLENE BAUGHMAN