



**Illinois Dental Hygienists' Association (IDHA) Mary Denowh Scholarship Application
\$750.00 Scholarship**

Qualifications

Each applicant must have finished one full semester of their Dental Hygiene Program.

Directions

Please type your answers directly on this form. Once you have completed the form, attach the saved document to an email and send to: IDHA.Scholar@gmail.com.

Deadline is **Sunday, September 10th** by midnight.

Recipient will be notified via phone and email by Sunday October 8th. The scholarship will be presented during the IDHA Annual Session on Saturday, November 4th at College of DuPage, Glen Ellyne, IL.

Each section will be followed by two bullet points for the scholarship members/reviewers to use for grading.

Section 1 Personal Information

Name _____

Email address _____

Phone number _____

- o Completed correctly (5 points), Grader/Rater will fill this out.
- o Partially/Incorrectly completed (0 points), Grader/Rater will fill this out.

Section II Personal Essay

In 2-3 paragraphs, tell us about yourself and why you deserve to receive this scholarship.

- o Completed correctly, length and no grammatical errors (15 points), Grader/Rater will fill this out.
- o Partially completed and/or grammatical errors (10 points), Grader/Rater will fill this out.

Section III Qualifications

1. Are you a current student in an Illinois Dental Hygiene Program and have completed at least one semester?

Applicant please bold or highlight your answer, Yes or No.

- Yes (5 points), Grader/Rater will fill this out.
- No (0 point), Grader/Rater will fill this out.

2. Are you currently an ADHA student member?

Applicant please bold or highlight your answer, Yes or No.

- Yes (5 points), Grader/Rater will fill this out.
- No (0 point), Grader/Rater will fill this out.

3. Are you able to attend (virtually or in person) the IDHA Annual Session to receive this award Saturday, November 4, 2023? Annual Session will be held at College of DuPage in Glen Ellyn, IL

Applicant please bold or highlight your answer, Yes or No.

- Yes (5 points), Grader/Rater will fill this out.
- No (0 point), Grader/Rater will fill this out.

Section IV Questions (minimum 3 sentences for each question)

1. What is the mission of IDHA?

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.

- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions

2. What does it mean to you to be an active member in IDHA/ADHA after graduation?

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.
- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions.

3. What are your professional and/or educational goals?

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.
- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions.

4. Tell us how you contribute to your local community or to your school community by way of service learning or volunteer events.

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.
- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions.

5. How do you plan to be a lifelong learner in the Dental Hygiene Profession?

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.
- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions.

Section V Faculty/ Instructor reference

The applicant needs to choose one instructor who will complete the information below for this portion of the scholarship. The chosen instructor then needs to send an e-mail to IDHA.Scholar@gmail.com with a statement agreeing with the description below, including student name, by **September 10, 2023**.

This instructor believes in the applicant and verifies the student is currently in the dental hygiene program and excels clinically, professionally, academically, and deserves to receive this scholarship.

Instructor's name _____

Instructor's email address _____

Instructor's office phone number _____

Student's name _____

Grader/Rater will fill this out below.

- 10 points, excellent answer, correct usage of grammar, and followed the instructions.
- 5 points, good answer, 1 error in grammar, and/or did not follow the instructions.
- 1 point, fair answer, 2 or more errors in grammar, and/or did not follow the instructions.

Total Points /95 points

The applicant with the most points out a 95 will receive an e-mail and phone, October 8, 2023, from Scholarship Committee Chair, Christine Bethel.

Thank you for your participation in the IDHA scholarship application process.

Christine Bethel, RDH, PHDH; Chris@dmkdds.com

Revised August 2023