



Your Smile Matters Scholarship Application Sponsored by the Utah Dental Association

Applicant Information

Full Name: _____
College/University: _____
Major/Program of Study: _____
Expected Graduation Date: _____
Email Address: _____
Phone Number: _____
Mailing Address: _____

Submission Checklist

Applicants must submit all of the following materials:

- ☐ 1 PSA Video (60–90 seconds) promoting the *Your Smile Matters* initiative.
- ☐ 3 Visual Images (billboard/print ready).
- ☐ 3 Social Media Posts (1 must highlight either National Dental Hygiene Month in October OR Children's Dental Health Month in February).
- ☐ Completed Application Form.
- ☐ Proof of Enrollment at Utah College or University

Short Answer Questions

Why are you interested in promoting oral health awareness?

How will your submission make an impact on Utah communities?

Applicant Agreement

I certify that all work submitted is my own and grant the Utah Dental Association the right to use my materials for educational and promotional purposes.

I acknowledge my submission becomes the property of the Utah Dental Association and may be used in future promotional, educational or advocacy materials.

Signature: _____ Date: _____

Submission Instructions

Email completed application and materials to becky@uda.org

Deadline: October 15, 2025

Questions? Contact Becky Waters at becky@uda.org