



Application

Applicant Name: _____

Parents' Name: _____

Address: _____

Parent/guardian/applicant **e-mail** address:

Responsible party phone numbers: Home: _____ Cell: _____

Submitted by (circle one): Self Parent School Counselor Dentist
Other _____

The applicant is an excellent candidate for Smile for a Lifetime because (please limit answer to space provided):

of times applicant has submitted an application to Smile for a Lifetime _____ Applicant age: _____
Applicant sex: _____ Applicant grade: _____ Household income: _____

Fathers place of employment: _____
Monthly gross income? _____

Mothers place of employment: _____
Monthly gross income? _____

Any other income? (child support, alimony, etc.) _____

Does applicant qualify for CHIP/Medicaid? _____

Applicants Dentist? _____ Date of last dental visit?* _____

Is applicant covered by dental insurance? (specify company and policy #): _____

*Dental visit in the last 6 months and all dental work completed is required.

Please submit application plus these required documents. All applications must be complete to be considered for this program.

Applicants are evaluated by the Smile for a Lifetime Board of Directors and chosen based on orthodontic need, financial need, desire for orthodontic treatment and commitment to treatment.

- ✓ You must submit a 5 X 7 **head-shot** photo of applicant with **full smile and teeth showing**.
- ✓ You must have two letters of reference (typed and limit each to one page each).
- ✓ You must provide verification of family income which can be last years tax return
- ✓ W-2 or a copy of the most recent pay stubs
- ✓ A written or typed letter from the applicant explaining why they would benefit from orthodontic treatment.

Please mail/email completed form with picture and reference letters to:

Smile for a Lifetime of Northern Utah

Attn: Katy Russell

736 S. 2000 W. Bldg. 2

Syracuse, UT 84075

For questions: 801-614-9090

colemanorthodontics@gmail.com

Candidates will be asked to provide verification of family income insuring Smile for a Lifetime that financial requirements are met.

All applications, pictures and supporting documents will **not** be returned and become property of Smile for a Lifetime Foundation.