



### **Who We Are**

Smile for a Lifetime Foundation is a charitable, non-profit organization that provides orthodontic care to individuals who may not otherwise have the opportunity to acquire assistance.

The Smile for a Lifetime Foundation Chapter of Hershey, Lebanon and Western Berks County aims to award orthodontic scholarships to middle school and high school age children who meet established financial criteria, and who have a support system to help maintain a two year treatment plan.

For more information please visit the National Smile For A Lifetime Foundation website at: [www.s4l.org](http://www.s4l.org)

### **Our Mission**

At Smile for a Lifetime Foundation it is our mission to create self confidence, inspire hope, and change the lives of children in our community in a dramatic way. The gift of a smile can do all this for a deserving, underserved individual who in turn, can use this gift to better themselves and our community.

### **Who Qualifies**

The foundation has a board of directors who will meet twice a year to review all applications of those candidates who have met all of the requirements of the Smile for a Lifetime Hershey, Lebanon and Western Berks County Chapter. They will vote and submit all of the potential award winners to be screened by Wertz Orthodontics. The Doctors at Wertz Orthodontics do not select the candidates. They act as advisors to the board to aid in any orthodontic questions they may have.

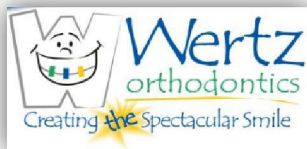
### **How to Apply**

Please fill out the application below and mail it to the address provided. The application questions may be typed and attached to the application. All potential award winners must include with their application a 5x7 head shot showing their smile and two letters of reference from an adult expressing the reasons they feel the candidate is deserving of such a life-changing award.

Letters and photos will not be returned. You are not eligible for consideration if you have not met the criteria or have an incomplete application. You will be notified and can resubmit your application for future consideration.



Smile for a Lifetime
Dr. Robert G. Wertz and Dr. Robert G. Wertz, Jr. – Founders & Orthodontic Providers



855 Norman Drive | Lebanon, PA 17042
541 West Penn Avenue | Robesonia, PA 19551

- You must submit two 5 x 7 photos of the applicant. One photo should be a headshot showing a full smile and the other should show only the applicant's teeth.
You must have two letters of reference (typed).

Applicant's Name: Age: Grade:

Name of Parent/Guardian: Relationship:

Address: City: Zip:

Home Phone: Cell Phone: E-Mail:

Parent/Guardian Employment:

Is the Applicant covered by dental insurance?: Does Applicant qualify for government assistance?:

Annual Household Income: Please be prepared to show a copy of last year's tax return, W-2s, or a copy of recent pay stubs for all family wage earners.

Submitted by (circle one): Self Parent Educator Dentist Other

E-mail address for Submitter: Phone:

Applicants School District:

I hereby approve the release of my financial information to the Board for the purpose of evaluating this application (signed parent and/or guardian):

\_\_\_\_\_

The Applicant is an excellent candidate for a Smile for a Lifetime Orthodontic Scholarship because:

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\_\_\_\_\_
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Please mail completed form (answers may be typed on a separate sheet) with pictures, reference letters & questionnaire to:
Smile for a Lifetime c/o Wertz Orthodontics
Attn: Lindsay K. Wertz
855 Norman Drive | Lebanon, PA 17042
Questions: rwertzjr@wertzorthodontics.com

All applications, pictures and supporting documents will NOT be returned and become property of Smile for a Lifetime Foundation.
Candidates chosen for screening will be asked to provide verification of family income.

