



Smile for a Lifetime of Greater Raleigh Area
Application Form

Applicant's name: _____ Age: _____ DOB: _____ Gender: _____

Name of Responsible Party: _____ Relationship to applicant: _____

Street Address: _____ City: _____ Zip: _____

Home phone number: _____ Mobile number: _____

E-mail address: _____

Is applicant a full-time student: Y / N Grade: _____ GPA: _____

Name of School: _____

Number of times applicant has previously submitted an application to Smile for a Lifetime: _____

Total household income: \$ _____
(Please include a copy of last year's tax return, W-2s, or a copy of the most recent pay stubs for all family wage earners.)

How did you hear about Smile for a Lifetime? _____

Please complete and attach the following to your application:

- 1) Include two 5 X 7 photos of applicant. One photo should be a head shot showing a full smile and the teeth; and one photo should show only the applicant's teeth.
- 2) Include two letters of reference (one page typed) from a teacher or community leader that knows the applicant describing why they're a good candidate for Smiles For a Lifetime.
- 3) Include a copy of applicant's last report card or school transcript.
- 4) Include complete answers for all of the questions on the attached Applicant Questionnaire.

Please attach completed form and all supporting documents and email them to:

s4lgreaterraleigh@yahoo.com

Or mail completed form and documents to:

Smile for a Lifetime of Greater Raleigh Area
1268 South Main Street
Wake Forest, NC 27587

Note: Applications, pictures and supporting documents will **not** be returned, and will become the property of Smile for a Lifetime of Greater Raleigh.

Signature of parent or legal guardian: _____ Date: _____

Applicant Questionnaire

(Please feel free to attach any additional pages to this application if you'd like more space)

1) Tell us about yourself. What do you like to do? What extracurricular activities do you participate in? Do you do any community service or volunteer work? What are your goals and aspirations?

2) Tell us about your family. How many people live with you, and who are they?

3) Why do you want braces? What prevents you from getting braces now? How do you feel about your smile now? How do you think braces will improve your life now and in the future?

4) If you had a chance to do a favor for another young person, without any expectation of being paid back, what would you do?
