



Smile Oregon Founders Scholarship Application Checklist

Deadline: March 15, 2026

Submission: Email all materials to Erica at ericas@smileoregon.org

Required Attachments

1. Personal Information Document

Applicants must create a document containing the following information:

- **Full Name**
- **Mailing Address**
- **Email Address**
- **Phone Number**
- **Educational Institution** (High School or College)
- **Intended College/Trade School** (if applicable)

- **Response to the Scholarship Prompt:**
How have you demonstrated resilience and positively impacted your community in the face of challenges associated with your cleft or craniofacial condition?
 - Choose **one format** to submit your answer:
 - **Video Statement** (Include a link to your video in the email body, max 10 minutes)
OR
 - **Written Statement** (Typed in the Personal Information Document, max 2 pages)

2. High School Transcript (for graduating seniors) or College Transcript (for current undergraduate students)

3. Activities and Awards List (list of extracurricular involvement, leadership, and accomplishments)

4. Letters of Recommendation (2 Required)

- Letter #1** – From a school staff member, medical professional, or community leader
- Letter #2** – From a school staff member, medical professional, or community leader

5. Medical Documentation (Letter from Care Team OR Medical Form verifying a cleft or craniofacial condition)