



# GKG Orthodontics

## “EMBRACE YOUR SMILE”

### Scholarship Essay

**JOHN MARSHALL GRADY, DMD**  
**DAN E. KASTNER, DMD**  
**MATTHEW C. GORNICK, DMD, MDS**

Practice Limited to Orthodontics  
Invisalign Specialists

1000 BROOKTREE ROAD • SUITE 200 • WEXFORD, PA 15090  
[www.gkgortho.com](http://www.gkgortho.com) e-mail [office@gkgortho.com](mailto:office@gkgortho.com)  
(724) 935-9222 Fax (724) 935-9241

MAKE-A-WISH<sup>®</sup> Sponsors

 AAC  
Members  
American  
Association of  
Orthodontists

# EMBRACE YOUR SMILE

## GKG Orthodontics Scholarship Essay Competition Guidelines:

This one time scholarship of \$1000 was established to recognize an individual with a potential to excel and become a contributing member of our community.

The information below highlights the requirements to be considered for this unique scholarship. Please be sure to fully complete this application, attach your essay and any other information you feel may be helpful to our decision.

### Eligibility:

- Graduating high school senior
- Must be a current or past patient of Grady, Kastner & Gornick Orthodontics
- US Citizen or permanent immigrant
- Cumulative state GPA of at least 3.0
- SAT score of 800 or ACT score of 18
- Letter of acceptance to a community college, vocational-technical, private or public educational institution in or out of the state of Pennsylvania

### Application:

- Copy of GPA, SAT and/or ACT results
- Letter of reference from a member of the administration or educational staff at your school
- A one page essay titled “Embrace Your Smile”
- Copy of letter of acceptance from school of your choice

### Submission Information:

- Application must be postmarked by **April 26, 2019**
- **All scholarship entries will be considered for use on our website and Facebook, Twitter & Instagram accounts**
- Mail or hand deliver to:  
GKG Orthodontics Scholarship Essay Competition  
Attn: Melissa Herbinko  
1000 Brooktree Road, STE 200  
Wexford, PA 15090

# EMBRACE YOUR SMILE

## GKG Orthodontics Scholarship Essay Competition Application:

**Applicant Name:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Alternate Phone Number:** \_\_\_\_\_

**GPA:** \_\_\_\_\_ **High School Name:** \_\_\_\_\_

**Activities:** \_\_\_\_\_

---

---

---

---

---

**Honors:** \_\_\_\_\_

---

---

---

---

---

**Ambitions:** \_\_\_\_\_

---

---

---

---

---