

Dr. Brenton Bennett Memorial Scholarship Form

The Dr. Brenton Bennett Memorial Fund awards a \$1,000 nonrenewable scholarship to (1) graduating senior. Students from USD 251 North Lyon County, USD 252 Southern Lyon County, USD 253 Emporia, USD 284 Chase County, and USD 386 Madison are eligible to apply. It is available to anyone applying to dental assisting, dental hygiene, or pre-dentistry.

The deadline to submit this application is **April 1, 2024**.

Name of Applicant:	Date of Birth:
Address:	
City: State:	
Phone #: Student Email Addre	ess:
Name of High School:	
Student's Cumulative GPA: ACT (Composite):	
Desired Dental Field:	
School/Dental School You Plan on Attending:	
Attach a copy of transcript Attach a list of extra-curricular and community service Attach a one page essay: Why are you pursuing a career	
I give my permission for the release of this application, my committee.	transcript, and GPA to the scholarship
Student Signature	Date
Parent/Guardian Signature	Date

Please return all applications and required documents to the ECF office at the address below.

What is your legacy?

527 Commercial St., Ste. B • Emporia, KS 66801 Email: emporiacf@emporiacf.org • Tel: 620-342-9304 • www.emporiacf.org