



PROGRAM CRITERIA

1. The dental component society includes an underserved, small community with a suitable venue.
2. The community is willing and eager to host the event.
3. A Dental Chairperson has been determined.
4. A Community Chairperson has been determined

Dental and Community Chairpersons are required to submit this application.

FINANCIAL GUIDELINES

1. **The community must agree to the following budget and fundraising efforts:**
 - a. **\$10,000 cash and in-kind contributions from local sponsorships raised by the community,**
 - c. **\$4,000 will be funded through the Meadows Foundation's gift to the TDASF.**
- Total resources required for a Smiles on Wheels event: \$14,000.00.**

COST OF PROGRAM

Smiles on Wheels is a program of the Texas Dental Association Smiles Foundation, a non-profit organization, and we are honored to help serve your community's current dental needs at no charge. All volunteer dentists donate their time and they do not get paid for the services provided.

APPLICATION PROCEDURES

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| Step 1: | Please complete, sign, and return the enclosed application to the TDASF office, no later than January 15, 2011.
(Address on last page) |
| Step 2: | A letter of acknowledgment will be placed in the mail when your application has been received. |
| Step 3: | You will be notified if your county is selected, and sent a planning package. |
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APPLICATION FOR SMILES ON WHEELS EVENT

Date of Application: _____, 20__

QUALIFICATION – Please Check box below:

The applicant named below includes an underserved, small community.

APPLICANT INFORMATION

Society/Organization's Name: _____ Phone: _____
Address: _____ Email address: _____
City, State, Zip: _____ Counties Served: _____
Dental Chairperson: _____ Dental Chair Email: _____
Community Chairperson: _____ Community Chair Email: _____

EVENT INFORMATION

Event Venue: _____ County: _____
Potential Dates: *(please list at least 3 dates in order of preference)* 1. _____ 2. _____ 3. _____

ADDITIONAL INFORMATION

Use this space to elaborate on how your community would benefit from being chosen as a Smiles on Wheels event site.

SEND APPLICATION TO:



Texas Dental Association Smiles Foundation

Smiles on Wheels

1946 South IH 35, Suite 300
Austin, TX 78704