2017 Bernard Maitenaz Scholarship Grant
CANDIDATE SUBMISSION FORM

Once your school’s or college’s candidate has been selected, please complete this form and send it with the submission to Optometry Cares® – The AOA Foundation no later than **October 31, 2016**.

<table>
<thead>
<tr>
<th><strong>Candidate Submission Information:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Candidate Name: _____________________</td>
</tr>
<tr>
<td>Candidate E-mail Address: ___________</td>
</tr>
<tr>
<td>School or College of Optometry: ______</td>
</tr>
<tr>
<td>Total Number of Applicants: _______</td>
</tr>
<tr>
<td>Awards Ceremony Date: ____________</td>
</tr>
<tr>
<td><strong>PLEASE ENCLOSE/ATTACH 2 LETTERS OF RECOMMENDATION, a 2-PAGE/1,500 WORD PAPER AND a 5-SLIDE POWERPOINT OR 3-MIN VIDEO</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>School/College Contact Information:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>(NAME, TITLE AND E-MAIL ADDRESS OF PERSON COMPLETING THIS FORM)</td>
</tr>
<tr>
<td>Name: ________________________________</td>
</tr>
<tr>
<td>Title: _______________________________</td>
</tr>
<tr>
<td>Address: _____________________________</td>
</tr>
<tr>
<td>City/St/Zip: __________________________</td>
</tr>
<tr>
<td>Phone: ______________________________</td>
</tr>
<tr>
<td>E-mail: ______________________________</td>
</tr>
</tbody>
</table>

- Does this student demonstrate financial need as verifiable by the Financial Aid Office?
  - [ ] YES
  - [ ] NO

*Please forward this form, 2 letters of recommendation, the candidate’s essay, and the candidate’s video or PowerPoint submission to:*

Brittany Broombaugh  
Development Coordinator  
Optometry Cares® - The AOA Foundation  
243 N Lindbergh Blvd.  
St. Louis, MO 63141  
314.983.4176 (Office); 314.991.4101 (Fax)  
bbroombaugh@aoa.org

Thank you for your participation in the 2017 Bernard Maitenaz Scholarship Grant. The Bernard Maitenaz Scholarship Grant winners will be announced in January 2017.
ATTENTION
THIRD YEAR STUDENTS!

$10,000 STUDENT SCHOLARSHIP

2017 Bernard Maitenaz Scholarship
Sponsored by: Essilor

With an educational background in optical science and engineering, Bernard Maitenaz, of Paris, France has made a significant impact on the optometric profession by inventing the Varilux lens.

In honor of Mr. Maitenaz’s accomplishments and contributions to the field of optometry, Essilor has established the Bernard Maitenaz Scholarship. The annual $10,000 scholarship will be awarded to the creator of the entry judged to be the best submitted to Optometry Cares, in accordance with the criteria listed below.

Eligibility and Requirements for the Bernard Maitenaz Scholarship are as follows:

- The applicant must be a third-year optometry student (class of 2018) in good standing with the American Optometric Student Association and the American Optometric Association.
- The applicant must be in good academic standing based on your school’s criteria.
- The applicant must demonstrate financial need as defined by their Financial Aid Office.
- Submit 2 letters of recommendation. One of the letters must be from an academic advisor/teacher/dean where the applicant attends school.
- The applicant must submit a 2-page essay* (in English & not to exceed 1,500 words) AND either a 3-minute video or a 5-slide PowerPoint Presentation based on the topic listed below meeting all of the submission criteria. For video and additional submission requirements, visit our website.

All entries must focus on the impact of vision on performance, economics education and lifestyle in the United States and beyond. Applicants must demonstrate leadership and participation in school and community activities, honors, and work experience, as well as include goals and aspirations, and unusual personal or family circumstances.

Each school and college will choose one candidate from all applications received by their on-campus deadline and forward the individual’s name and essay to Optometry Cares in St. Louis by October 31, 2016. One overall recipient will be selected from all applications received. The winner will be announced in January 2017.

* Prior to the committee’s review process, essays will be redacted to remove identifying information including name, employers, school, race, and gender. To minimize the impact of redaction on your submission, please use generic language such as “Optometry School” or “Clinic”.

Optometry Cares® – The AOA Foundation
243 N. Lindbergh Blvd., St. Louis, MO 63141
Phone: 314-983-4218, Fax: 314-991-4101
E-mail: foundation@aoa.org, www.aoafoundation.org
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Materials are to be submitted to ________________ by ________________.

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