The ADHA Institute for Oral Health/DentalCodeology Consortium (DCC)

2021 DCC Trailblazer Travel Grant

Sample of Online Application

**Purpose:**
The purpose of the DCC Trailblazer Travel Grant is for partial funding (depending on availability, maximum $500 per recipient) for one or more ADHA/DCC Members’ travel costs to attend and potentially testify at the American Dental Association’s Codes Maintenance Committee (CMC) meeting held in Chicago, Illinois each spring. This CMC hearing is an opportunity to influence the ADA committee to consider changes or additions to the CDT codes, including those that directly impact Dental Hygiene.

**Eligibility:**
Applicant must be an ADHA member and DCC Work Group active member.
Applicant must have the necessary qualifications to influence the ADA committee to consider changes to CDT codes, including those that directly impact Dental Hygiene

**Application Timeline:**
Applications available: July 1
Application Deadline: September 1
Notification to Applicants: After November 1
Grant Distribution: After January 1

*The recipient(s) will be required to submit a report to the DentalCodeology Consortium (DCC) Advisory Board by April 1*

**Tasks to be Completed by ADHA/DCC Member Applicant**

1) **Agreement Statement:** (check box)
I confirm that I am a current ADHA member and active DCC Work Group member.

2) **Complete Applicant Profile Information**
Please complete the following information. *An applicant must be a current ADHA member and a DCC Work Group member. Only one submission is allowed per applicant.*
Name
Email Address
Street Address
City, State, Zip Code
Cell Phone
ADHA Member #

3) **Upload Photo**
Please upload a digital photo of yourself

4) **Select Grant Type**
Briefly explain why you have chosen to apply for this grant
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5) Statement (300 words or less)
Submit a statement describing your qualifications to be an attendee at the CMC. (Examples: clinical expertise; networking; testimony.) Additionally, explain the assets you have to influence the ADA committee to consider changes to CDT codes, including those that directly impact Dental Hygiene.

6) Read and Agree to Consent Form (check box)
Agreement: If selected for an ADHA Institute for Oral Health grant or scholarship, I hereby give the American Dental Hygienists’ Association and its sponsor(s) the absolute right and permission to publish my photo and biographical information on their website and in other publications and marketing channels.
I agree to submit required reports.
I fully affirm that the information provided is the truth to the best of my knowledge.