

State of Wisconsin Higher Educational Aids Board

Governor

Tony Evers

P.O. Box 7885 Madison, WI 53707-7885 HEABmail@wisconsin.gov ep 267-2206 Fax: (608) 267-2808 https://heab.state.wi.us

Tammie DeVooght Executive Secretary

Dental Scholarship Program Applicant Information Sheet

The Dental Scholarship Program (DSP) was created to encourage dentists to practice in areas qualifying as designated Dental Health Shortage Areas, which does not include Brown, Dane, Kenosha, Milwaukee, or Waukesha County, in the State of Wisconsin. A student is eligible to apply if she or he is a Wisconsin resident and enrolled in a graduate dental health training program (Dental Health Care Training Program) at the Marquette University School of Dentistry in the State of Wisconsin.

The dental student must enter into an agreement with the Higher Educational Aids Board (HEAB) indicating that, upon graduation, she or he intends to practice in an area which qualifies at the start of the employment as a designated Dental Health Shortage Area, which does not include Brown, Dane, Kenosha, Milwaukee or Waukesha County, in the State of Wisconsin for a period equal to 18 months for each annual scholarship accepted by said student.

If the dental scholarship recipient fails to practice in a designated Dental Health Shortage Area, which does **not include Brown**, **Dane**, **Kenosha**, **Milwaukee or Waukesha County**, in this state for the required period, she or he must **repay** to the state an amount equal to the **total dollar amount of annual scholarships awarded to the dental student multiplied by the student's repayment liability percentage. The scholarship then becomes a loan**.

Students are eligible to apply if they:

- file a 2025-26 FAFSA: FAFSA® Application | Federal Student Aid
- are currently in a Dental Health Training Program at the Marquette University School of Dentistry to become a
 dentist.
- are considered a Wisconsin resident for financial aid purposes.
- intend to practice in a designated Dental Health Shortage Area, which does not include Brown, Dane, Kenosha, Milwaukee or Waukesha County, in the State of Wisconsin.

HEAB will award up to 15 dental students an annual scholarship equal to \$30,000 each for every academic year in which they apply and are eligible. Scholarships will be awarded based on the United States postmark date of the application.

Scholarships are available for up to **four (4)** years. Scholarship recipients must **reapply** every year for DSP scholarships and the scholarships are disbursed on a **first come**, **first served basis**. If a scholarship recipient's name appears on the statewide support lien docket, the recipient is no longer eligible until the recipient is off the support lien docket.

After completing a Dental Health Care Training Program at the Marquette University School of Dentistry, the scholarship recipient must practice in a designated Dental Health Shortage Area, which does **not include Brown, Dane, Kenosha, Milwaukee or Waukesha County,** in Wisconsin. Qualifying designated Dental Health Shortage Areas may **change** and are updated on the Wisconsin Department of Health Services website at:

Wisconsin Primary Care Programs: Shortage Designations | Wisconsin Department of Health Services

To be considered for a Dental Scholarship, please complete the following steps:

Step One: DSP Scholarship Application Procedure:

• Students should inform financial aid office administrators of their interest in receiving a DSP scholarship each year, so administrators will consider them. Based on program eligibility criteria, the school financial aid administrator will designate students who show eligibility for the DSP and offer dental scholarships.

First, the student must complete the **DSP** Application, and return it to the financial aid office at Marquette University. The **DSP** Application must be completed and signed by both the dental student applicant and a representative of the financial aid office at Marquette University for verification of the student's enrollment as a dental student in a Dental Health Care Training Program at the school. Original or electronic signatures are accepted.

The financial aid office administrator will provide the student applicant with the following Truth In Lending (TIL) documents: 1) H19 Approval Disclosure, and 2) H20 Final Disclosure. The H19 Approval Disclosure and H20 Final Disclosure documents are for the applicant to keep. These disclosures do not need to be signed or returned to HEAB.

After receipt of the H19 Approval Disclosure document, the student applicant has 30 days to complete and sign the Applicant Self-Certification Form. The student applicant's dated signature serves as the time of acceptance of the scholarship.

Financial Aid Office Administrators submit both the completed DSP Application and Applicant Self-Certification documents at one time for each dental student applicant:

By Email to: joy.dyer@wisconsin.gov or

By fax: 608-267-2808 or

By mail to: Joy Dyer, HEAB-DSP Grant Specialist

PO Box 7885

Madison, WI 53707-7885

After HEAB receives and approves the completed **DSP Application** and **Applicant Self-Certification** documents for each applicant, the DSP scholarship funds will be disbursed directly to Marquette University for each dental student scholarship recipient. Subsequent academic year DSP scholarships are subject to this process.

Step Two: After Graduation, Practice in a Dental Health Services Shortage Area in Wisconsin

The scholarship recipient must practice in an area which qualifies at the start of the recipient's employment as a designated Dental Health Shortage Area, which does not include Brown, Dane, Kenosha, Milwaukee or Waukesha County, in Wisconsin for a period equal to 18 months for each annual scholarship that was accepted. A Dental Health Shortage Area is an area in Wisconsin, which does not include Brown, Dane, Kenosha, Milwaukee or Waukesha County, that is designated by the Federal Department of Health and Human Services under 42 CFR part 5, appendix B, as having a shortage of dental professionals.

Qualifying designated Dental Health Shortage Areas, which does **not include Brown, Dane, Kenosha, Milwaukee, or Waukesha County,** in Wisconsin include any of the following: Health Professional Shortage Areas (HPSA*), Medically Underserved Areas or Medically Underserved Populations (MUA/MUP), or a Governor's Designated and DHHS Secretary Certified Shortage Areas for Rural Health Clinics. For more information about each area, please visit: https://www.dhs.wisconsin.gov/primarycare/shortage-designation.htm

To find facilities with a HPSA-Facility designation or rural health clinic with a Governor's Shortage Designation use the HPSA Find Tool at:

http://datawarehouse.hrsa.gov/tools/analyzers/hpsafind.aspx

To determine if an address is in a HPSA-Geographic or Population Group designated area or a MUA/MUP, use the Find Shortage Areas by Address Tool at:

http://datawarehouse.hrsa.gov/tools/analyzers/geo/ShortageArea.aspx

Step Three: Submit a Verification of Practice Form

Every year (12 months) of practice, a dental scholarship recipient must submit a Verification of Practice Form to HEAB. The form must be completed and signed by both the dental scholarship recipient and their employer. This form will require information about current employment and the designated Dental Health Shortage Area, which does not include Brown, Dane, Kenosha, Milwaukee or Waukesha County, in Wisconsin in which the dental scholarship recipient is serving. The dental scholarship recipient's employer will need to certify the number of months of completed employment. The dental scholarship recipient is required to submit proof of a permanent dental license.

REPAYMENT REQUIRED FOR FAILING TO PRACTICE IN A DENTAL HEALTH SHORTAGE AREA

Dental scholarship recipients who withdraw from their Dental Health Training Program, or who do not practice in a qualifying designated Dental Health Shortage Area for the required number of months, must repay the dental scholarship to the State of Wisconsin. The dental scholarship will at this point be considered a loan. An interest rate of 5% will be added to the loan. Payments will be required beginning six (6) months after withdrawal from the Dental Health Care Training Program or graduation. The loan must be paid in full within ten (10) years from the date that repayment begins.

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