

Susan Brown Memorial Entrance Scholarship



Overview

The Susan Brown Memorial Entrance Scholarship honors Susan Brown, a past Chairperson of CHHA-NL's Families Resource Group. It celebrates her commitment to informed parenting and the empowerment of children with hearing loss. This scholarship seeks to support hard of hearing students beginning their post-secondary education, reflecting Susan's belief that a strong education and learning how to advocate for yourself can change lives.

Scholarship

The Susan Brown Memorial Entrance Scholarship offers:

- Financial assistance to **hard of hearing students entering their first year of post-secondary studies**. Students are required to follow the [provincial government's guidelines for students with disabilities](#). As of 2024, this guideline states that students must carry at least 40% of a full course load at a recognized Canadian college or university, to obtain a diploma, a certificate, or a degree.
- One thousand dollars (**\$1000**) will be awarded to one student each academic year after **proof of enrollment** has been received.

Please note: Applicants who have never lived in Newfoundland and Labrador will not be considered for this scholarship. Visit the [CHHA National website](#) for information about scholarships in your area.

Submitting your application

All scholarship applications must be submitted by **July 15** of each year. Applications that are late or incomplete will not be eligible for consideration. You may submit your application via mail, email, or in person.

Drop off or mail your application:

Scholarship Committee
Canadian Hard of Hearing Association - NL
1081 Topsail Road
Mount Pearl, NL
A1N 5G1

Submit your application by email:

Email: info@chha-nl.ca

Have any questions? Call or text us!

Phone (Toll-Free): 1-888-753-3224

Text Only: 1-709-725-3224

Rules and Policies

1. Scholarship applicants must have a documented hearing loss, verified by an audiogram or other professional documentation from an audiologist, and must be proficient in spoken English.
2. To be eligible, applicants must be entering their **first year of post-secondary education** in Canada in any field of study.
3. Priority will be given to applicants graduating from a Newfoundland and Labrador high school. Should there be no applicants from Newfoundland and Labrador, Canadian citizens or permanent residents who have resided in Newfoundland and Labrador for the past 12 consecutive months will be considered. **Those who have never resided in Newfoundland and Labrador are ineligible for this scholarship.**
4. The selection for the **Susan Brown Memorial Entrance Scholarship** will be based on a comprehensive evaluation, including academic performance, the applicant's determination to manage their hearing loss, and community participation.
5. Successful applicants will be awarded **one thousand dollars (\$1000)** by **September 30th** after the **proof of enrollment** from the post-secondary institution is provided to CHHA-NL.
6. Scholarships offered by CHHA-NL are made possible through the Association's fundraising efforts. CHHA-NL reserves the right to either discontinue the scholarship or adjust the amount awarded due to financial limitations.
7. In certain circumstances, a deferral of the award may be granted with a written request to CHHA-NL.

Section 1: Application Form

Please fill out the following form in full and check off the boxes or circle your answers.

First Name: _____ Last Name: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Email: _____

Phone Number: _____

Preferred Contact Method: Phone Call Text Email

I am a Canadian Citizen or permanent resident of Canada:

- Canadian Citizen Permanent resident of Canada (proof may be requested)

I have been a resident of Newfoundland and Labrador for the past 12 consecutive months:

- Yes No

I graduated from a Newfoundland and Labrador high school:

- Yes No

What is your current educational status?

- Student beyond the first year of post-secondary education.

- Other: _____

Please outline your PAST educational history, **including high school**:

Name of educational institution	Program completed	Credential earned (e.g., Diploma, Degree)

- What program will you be completing in post-secondary? _____
- Where will you be completing this program? _____
- Is this program leading to a diploma, certificate, or degree? _____

Do you consent to have your name and/or photographs used in promotional materials for our scholarship program, should you be awarded the scholarship?

- Yes
 Yes, only my name
 No

By signing and dating below, you confirm that the information provided in this application is true and accurate to the best of your knowledge:

Signature

Date

For CHHA-NL Office Use Only	Application I.D. #
Meets NL Residency Requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No	Application Form Received: <input type="checkbox"/> Yes <input type="checkbox"/> No
Audiogram Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Statement Received: <input type="checkbox"/> Yes <input type="checkbox"/> No
References Received: <input type="checkbox"/> One <input type="checkbox"/> Two	Official Transcript Received: <input type="checkbox"/> Yes <input type="checkbox"/> No

Section 2: Accessibility Profile

Complete the section below to detail your accessibility profile. This information is essential for confirming your eligibility for the scholarship and will account for **20 points of your overall application score**. Fill in the necessary information and check off or circle your answers.

Age at which hearing loss was diagnosed: _____

Cause of hearing loss (if known/applicable): _____

Have you been prescribed any hearing technology, such as hearing aids or cochlear implants, by a hearing care professional?

Yes, hearing aid(s) Yes, cochlear implant(s) No

Yes, other: _____

If you answered **yes** to the previous question, please specify the number of each device you have and describe how frequently you use the prescribed hearing technology?

Do you have **any other disabilities** in addition to hearing loss?

Yes No

If you answered **yes** to the previous question, please share details about your additional disabilities, including their nature, the time of diagnosis, and any aids or tools you use for assistance:

Your application MUST include a recent audiogram that has been signed and dated by a hearing care professional, and issued within the last 3 years.

Section 3: Essay

Please submit a 2000-word essay that clearly and concisely answers the following questions. Your responses should be typed and included in your application package.

This portion of the application is valued at 60 points.

1. Tell us about yourself. What are your passions, special talents, or interests? (10 points)

You may also use this question as an opportunity to share:

- Your past achievements and personal highlights
 - Work or volunteer experience
 - Community involvement
 - Participation in sports, clubs, or organizations
2. What are your academic and professional aspirations? Think about what you would like your career to look like, and what steps you will take to get there. Are there specific resources or support you will need to reach these goals? **(10 points)**
 3. What tools or strategies do you use to navigate challenges associated with your hearing loss? This may include prescribed hearing devices, FM/DM systems, or other accessibility aids. How do these tools benefit you, and in what situations do you find them most useful? **(10 points)**
 4. Describe a situation when your hearing loss acted as a barrier in your life. What tools or strategies did you use to overcome this challenge? Reflect on how this experience impacted you and share any lessons you learned from it. **(20 points)**
 5. What advice would you offer to someone who has recently been diagnosed with hearing loss? Are there insights from your own journey with hearing loss that could be beneficial? Is there something you wish you had understood earlier about the impact of hearing loss on your life? **(10 points)**

Section 4: References

Additionally, you are required to submit **two typed letters of reference**. Those providing references should follow the **Reference Guidelines** available on our Grants and Funding page. References must come from **individuals outside of your immediate family or household**. Suitable references might include teachers, itinerant teachers, past employers, teammates, or coaches. **Reference letters may be submitted directly to CHHA-NL via email, mail, or fax.** Alternatively, reference letters may be provided to the applicant in a sealed envelope. **(20 points, 10 points for each reference)**

Final Checklist

Below is a final checklist of all the required items for your scholarship application.

- Section 1: Application Form has been completed**
 - Included an official copy of your most recent school transcript
- Section 2: Your Accessibility Profile has been completed (20 points)**
 - Included a copy of your audiogram, issued within the last 3 years.
- Section 3: Essay has been completed (60 points)**
 - Your response must be typed, not exceeding the total of 2000 words.
 - Questions 1-5 are answered thoroughly.
- Two reference letters, following the Reference Guidelines (20 points)**

Thank you for submitting your application to the Canadian Hard of Hearing Association - Newfoundland and Labrador (CHHA-NL) Scholarship Program. The Scholarship Committee will conduct a thorough review of your submission. All applicants will be informed of their application status, whether successful or not, by September 1st of the application year.

Please note that the decisions of the Scholarship Committee are final.

We encourage you to apply for our scholarships in future years, even if your current application is not selected. Next year, you might consider applying for the Glenna Stone Memorial Undergraduate Scholarship.

For a comprehensive list of scholarships offered by CHHA-NL, please visit our website: [Scholarships | CHHA-NL](#)

REMINDER: SCHOLARSHIP APPLICATION DEADLINE IS JULY 15TH

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