



The **Susan Brown Memorial Entrance Scholarship** is awarded to a deserving student in memory of Susan Brown, Chairperson of the CHHA-NL Families Resource Group who passed away in 2017.

Susan believed that knowledge was power. She believed that parents need to know all the services available for their child and how to access them within the education system. She also believed that parents need to teach their child at a young age how to communicate their hearing needs and to advocate for themselves. The renaming of this scholarship in her name is a testament to those beliefs.

The **Susan Brown Memorial Entrance Scholarship** offers:

- Financial assistance to oral communicating students with hearing loss or an auditory processing disorder **entering their first year of study** in a full-time program at a recognized Canadian college or university in any area of study, with the ultimate goal of obtaining a diploma, certificate or degree.
- One thousand dollars (\$1000) will be awarded to one student during the academic year of study.

All eligible scholarship applications will be **automatically** considered for the **Horn-Smith Merit Scholarship** (\$1000). Candidates will not be required to submit an additional application to apply for this scholarship.

The Horn-Smith Scholarship of Merit is donated by Marion Smith in loving memory of her parents William and Bertha **Horn** and her husband, James G. **Smith**. Marion now knows firsthand the obstacles that accompany hearing loss and as a result understands better, the difficulties her father experienced due to his hearing loss. Also being a former teacher, she realizes the extra challenges that hard of hearing students face in obtaining an education. Thus she offers this scholarship to assist students with hearing loss as they strive to achieve a higher education.

Applications must be received by **June 30**. Late, unsigned or incomplete applications will not be considered.

Canadian Hard of Hearing Association- Newfoundland and Labrador (CHHA-NL)
1081 Topsail Road, Mount Pearl, NL, A1N 5G1
Fax: (709) 753-5640 E-mail: info@chha-nl.ca

POLICY AND PROCEDURES

1. Applicants of this scholarship must have a hearing loss or an auditory processing disorder and be able to provide proof through an audiogram or other documentation from an audiologist. Applicant's also must have the ability to communicate with spoken language.
2. Eligible applicants must be **entering their first year** of study at any post-secondary institution in Canada for any field of study.
3. First preference will be given to applicants who have graduated from a High School in Newfoundland and Labrador. If no such applications are received, applicants who have lived in Newfoundland and Labrador for a minimum of 12 consecutive months will be considered. Applicants who have never lived in Newfoundland and Labrador will **not** be considered for this scholarship.
4. Eligibility for the **Susan Brown Memorial Entrance Scholarship** is based on an overall assessment of the applicant. Applications will be judged by a number of criteria including academic achievement, determination to cope with hearing loss, and community involvement (**See Application Form for details**).
5. Successful applicants will receive funds in the amount of one thousand dollars (\$1000) that will be distributed by September 30th when proof of registration from the post-secondary institution is presented to CHHA-NL.
6. Scholarships provided by CHHA-NL are possible due to Association fundraising efforts. CHHA-NL reserves the right to discontinue or reduce the amount of scholarships in any given year due to budgetary constraints.
7. In certain circumstances, a deferment of the award may be granted with a written request to CHHA-NL.
8. Recipients must agree that their names and/or photographs may be used for promotion of the CHHA-NL Scholarship Program and to encourage future applicants. Mediums may include but not limited to the following: CHHA-NL's website www.chha-nl.ca, CHHANL's e-newsletter **Sound Ripples**, CHHA National's **Listen Magazine**, CHHA Conference and Annual General Meeting, local newspapers (in recipient's community), Social Media Platforms and a press release to national media.

**Canadian Hard of Hearing Association- Newfoundland and Labrador
Scholarship Application Form**

I am applying for:

- Susan Brown Memorial Entrance Scholarship *(for first-year students only)*
- Glenna Stone Memorial Scholarship *(for undergraduate students beyond 1st year of studies)*
- Dr. Norah Browne Graduate Studies Scholarship *(for students in programs such as Masters or PhD)*
- Horn-Smith Merit Scholarship (All eligible scholarship applications, with the exception of the Audiology Scholarship, will be **automatically** considered for the **Horn-Smith Merit Scholarship** (\$500). Candidates will not be required to submit an additional application to apply for this scholarship.

Application Deadline: June 30

Please Note: Incomplete applications will not be considered. It is your responsibility to ensure your application is **complete** and all information is **received before June 30**. You may contact CHHA-NL at any time to determine if your application and all supporting documents have been received.

Section 1: Please fill in necessary information, and write an X in the boxes where necessary:

First Name:

Last Name:

Address:

City:

Province:

Postal Code:

Phone/TTY:

Email:

I consider myself to have: *(please circle)*

Hearing Loss

Auditory Processing Disorder

For Office Use Only:

Meets Residency Requirements:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Received Personal Statement:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Received Audiogram:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Received Transcript:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of References Received:	<input type="checkbox"/> 1	<input type="checkbox"/> 2			

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

Yes No

I graduated from a Newfoundland & Labrador High School:

Yes No

I am a:

- High school graduate entering my first year of post-secondary education.
 - Full-time college or university student and have already have begun my post-secondary education.
 - Mature student starting post-secondary for the first time.
 - Mature student returning to post-secondary.
 - Other (specify in space provided):
-
-

Please outline your education history, including current program of study:

Name of High School/Post Secondary:	Program (If Applicable):	Diploma/Degree Received:

Section 2: The following information MUST be provided to ensure eligibility for this scholarship. You MUST also include a recent (within the past 3 years) AUDIOGRAM signed and dated by an audiologist. Please fill in necessary information, and write an X in the boxes where necessary (Worth 30 points of your application):

Age when hearing loss was diagnosed: _____

Cause (if known): _____

Do you require hearing aids: Yes Sometimes No

Do you wear hearing aids: Yes Sometimes No

If you answered **yes** to wearing hearing aids, how many do you wear?: _____

Do you have a cochlear implant? Yes No

Do you wear a cochlear implant? Yes No

If you answered **yes** to having a cochlear implant, how many do you wear?: _____

If you answered **yes** to having a cochlear implant, what age did you receive it?: _____

Do you have any other disabilities in addition to hearing loss? Yes No

If you answered **yes** to having any other disabilities, please explain: _____

Please answer the following questions reflecting upon your CLASSROOM ACCESSIBILITY needs (ie: how you address your hearing loss in the classroom):

- | | | | |
|--------------------------------------|------------------------------|------------------------------------|-----------------------------|
| Do you require hearing aids? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you use hearing aids? | <input type="checkbox"/> Yes | <input type="checkbox"/> Sometimes | <input type="checkbox"/> No |
| Do you have a cochlear implant? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you use your cochlear implant? | <input type="checkbox"/> Yes | <input type="checkbox"/> Sometimes | <input type="checkbox"/> No |
| Do you require FM? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you use FM? | <input type="checkbox"/> Yes | <input type="checkbox"/> Sometimes | <input type="checkbox"/> No |
| Do you require preferred seating? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you use preferred seating? | <input type="checkbox"/> Yes | <input type="checkbox"/> Sometimes | <input type="checkbox"/> No |
| Do you require note takers? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you use these notes/this service? | <input type="checkbox"/> Yes | <input type="checkbox"/> Sometimes | <input type="checkbox"/> No |
| Other Accessibility Needs? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

If you said **yes** for other, please explain: _____

Section 3: Personal Statement. Please answer the following four questions to the best of your ability. Answers should be typed and enclosed with your application (Limit: 1000 Words) (Worth 50 points):

- 1) Please outline your educational goals (ie. To obtain college diploma, university degree, etc.) AND your career aspirations.
- 2) Please give an example of a time, if any, when you promoted awareness of hearing loss issues.
- 3) Please give an example of an occurrence, if any, when you identified yourself as a person with hearing loss.

- 4) Please provide a personal statement describing how you believe hearing loss has affected your life, and how you believe you have overcome the challenges associated with hearing loss. Additionally, please outline any past achievements, personal highlights and/or participation in sports, clubs, or organizations. Describe your plans for the future and any other goals you hope to achieve.

Section 4: Please include two letters of reference, typed, not to exceed 500 words. Individuals providing references should be directed to use the **Reference Guideline Form**. References must be from someone other than your immediate family or anyone living in your household. Some examples of possible references include itinerant teacher, teacher, employers or places where you have volunteered (Worth 20 Points).

Thank you for your application for the Canadian Hard of Hearing Association- Newfoundland and Labrador (CHHA-NL) Scholarship Program. Your submission will be carefully reviewed by the Scholarship Committee. Only successful applicants will be notified. Scholarships are granted on a one-time basis, though you may apply in successive years if this application is not selected. Please note that the decisions of the Scholarship Committee are final.

Applicant Signature

Date

Please Submit Applications by mail or fax to:

Canadian Hard of Hearing Association- Newfoundland and Labrador (CHHA-NL)
1081 Topsail Road, Mount Pearl, NL, A1N 5G1

Fax: (709) 753-5640

For further information:

Web: www.chha-nl.ca
E-mail: info@chha-nl.ca
Phone: 1-888-753-3224
Text: (709) 725-3224

CHECKLIST: Please ensure that your application package includes the following documents:

- This completed application Form
- Audiogram or Audiologist Note
- A copy of your most recent school transcript
- Your answers to Section 3
- Two reference letters in accordance with reference guidelines

Note: Please remind your references that, if submitted by mail, all letters must be received by June 30th.

Reference Guideline Form

Thank you for providing the Canadian Hard of Hearing Association- Newfoundland and Labrador (CHHA-NL) Scholarship Committee with a reference letter for a potential scholarship winner. CHHA-NL will evaluate the student on the information you provide based on the following questions:

- 1) Do you feel this person is deserving of a CHHA-NL scholarship? Why?
- 2) Does this person require and consistently use hearing assistive technology where appropriate (i.e. hearing aids, FM, a sound field system, etc.)?
- 3) Does this individual self-identify as a person with hearing loss?
- 4) Does this person positively promote awareness of hearing loss (i.e. at school, in their community)?

All reference letters must be received by June 30th in order for the student to qualify for the scholarship.

Reference letters may be provided to the applicant in a sealed envelope or, may be sent by mail, or delivered in person, to CHHA-NL.

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