

**The Canadian Hard of Hearing Association - Newfoundland and Labrador (CHHA-NL)  
Glenna Stone Memorial Scholarship & Dr. Norah Browne Bursary Application**

*I am applying for (you can apply for both):*

- Glenna Stone Memorial Scholarship** (any person going to or attending post-secondary)
- Dr. Norah Browne Bursary** (for first-year students only)

**SECTION 1: APPLICANT INFORMATION**

Name .....

Address .....

City..... Province..... Postal Code.....  
...

Phone/TTY..... E-mail .....

Date of Birth..... Age..... Gender:  male  female  
(mm/dd/yy)

I consider myself to be

- hard of hearing
- oral deaf
- late deafened
- other (specify) .....

**SECTION 2: AUDIOLOGICAL INFORMATION**

**The following information must be provided to ensure eligibility for this scholarship.**

Age when hearing loss was diagnosed .....

Cause (if known) .....

Do you wear hearing aids? Yes  No  If yes, how many? .....

Do you have a cochlear implant? Yes  No  If yes, when where you implanted? .....

Do you have any other sensory or mobility disability in addition to your hearing loss? Yes  No

If yes, please explain the nature of this disability .....

.....

**You must include an audiogram signed and dated by an audiologist.**

**SECTION 3: CLASSROOM ACCESSIBILITY NEEDS**

Please explain how you address your hearing loss in the classroom. Outline any accommodations you have requested and received (assistive devices, notetakers, preferred seating etc).

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**SECTION 4: EDUCATION**

**You must include a transcript for your most recent year/semester/term of study.**

I am currently registered at..... Year of Study .....

Program of study..... Length of program .....

- I am a high school graduate entering my first year of post-secondary education.
- I am a full-time college or university student and have already begun post-secondary education
- I am a mature student returning to school at the post-secondary level
- Other .....

Please outline your recent education history

	Name of High School/College/Unversity	Program (if applicable)	Diploma/Degree Received
1			
2			
3			

Please outline your educational goals (i.e. to obtain College Diploma, University Degree, etc.)

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Please outline your career aspirations

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**SECTION 5: ADVOCACY/AWARENESS**

Yes  No  I am a member of the Canadian Hard of Hearing Association -  
Newfoundland and Labrador (CHHA - NL)

Other  (specify) .....

Please give an example of a time, if any, when you promoted awareness of hearing loss issues

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Please give an example of an occurrence, if any, when you identified yourself as a person with hearing loss

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**SECTION 6: PERSONAL STATEMENT**

Please outline any past achievements, personal highlights and/or participation in sports, clubs or

organizations. Describe your plans for the future, including your career aspirations or any other goals you hope to achieve. You must include this information as an attachment, typed, not to exceed 500 words.

## SECTION 7: LETTERS OF REFERENCE

Please include two letters of reference, typed, not to exceed 500 words. References must be from someone other than your immediate family or anyone living in your household.

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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, and you will be notified in writing whether or not your application was successful. 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.

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Applicant Signature

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Date

### CHECKLIST

**Please ensure that your application package contains the following documents:**

- This completed application form
- A signed audiogram
- A copy of your most recent school transcript
- A personal statement
- Two letters of reference