



**The Dr. Norah Browne Graduate Studies Scholarship** is awarded to a deserving graduate student in memory of Dr. Norah Browne, founding President of the Canadian Hard of Hearing Association- Newfoundland and Labrador.

**Dr. Norah Browne** was instrumental in growing the Association, creating greater public awareness of the hearing accessibility needs in public facilities, and for being a strong and forthright advocate for the rights of all hard of hearing persons. The scholarship, awarded annually, is a testament to her work and passion.

**The Dr. Norah Browne Graduate Studies Scholarship** offers:

- Financial assistance to students with hearing loss or an auditory processing disorder registered in a full-time graduate program at a recognized Canadian college or university, in any area of study.
- 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](mailto: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 or enrolled in a graduate program** 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 **Dr Norah Browne Graduate Studies 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](http://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:

- CHHA-NL Entrance Scholarship *(for first-year students only)*
- Glenna Stone Memorial Scholarship *(for undergraduate students beyond 1<sup>st</sup> 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** (\$1000). 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. Application criteria, forms, and reference guidelines are available at [www.chha-nl.ca](http://www.chha-nl.ca) or by contacting our office.

### 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

<b>For Office Use Only:</b>					
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): \_\_\_\_\_

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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?:

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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?:

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

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

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

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**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?            Yes            No

Do you use hearing aids?                Yes            Sometimes    No

Do you have a cochlear implant?        Yes            No

Do you use your cochlear implant?      Yes            Sometimes    No

Do you require FM?                        Yes            No

Do you use FM?                              Yes            Sometimes    No

Do you require preferred seating?       Yes            No

Do you use preferred seating?            Yes            Sometimes    No

Do you require note takers?              Yes            No

Do you use these notes/this service?    Yes            Sometimes    No

Other Accessibility Needs?                Yes            No

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

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**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 outline 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.**

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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](http://www.chha-nl.ca)  
E-mail: [info@chha-nl.ca](mailto: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
- A signed audiogram
- 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 30<sup>th</sup>.***

## 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 30<sup>th</sup> 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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