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About the CHS National Scholarship Program

Canadian Hearing Services proudly offers scholarships to Deaf and hard of hearing students to help break down barriers to higher education and build brighter futures.

Scholarships of \$3,000 a year for full-time students and \$1,000 a year for part-time students are awarded to top qualified candidates who are pursuing post-secondary education at an accredited institution, inside or outside of Canada. Once secured, students may receive an annual award for up to four consecutive years. Awards may cover tuition, residence or educational resources. The exact number of awards will be dependent on the number and ranking of qualified applicants.

Eligibility Criteria

- Applicants must be Canadian citizens or permanent residents of Canada;
- Applicants must be either Deaf or hard of hearing;
- Applicants must be 17 years of age or older and attending a recognized post-secondary institution in the Fall of 2024.

Required Documentation

- Selection is based on the overall assessment of the following application materials:
 - Completed and signed scholarship application form;
 - Photocopy proof of Canadian citizenship or permanent residency with date of birth;
 - At least one audiogram documenting hearing loss of 50dB or greater, pure tone average, in each ear (50dB or greater in the left ear AND 50dB or greater in the right ear);
 - Proof of Fall 2024 registration/acceptance to an accredited post-secondary institution (proof of registration, signed consent form and thank-you video are required before students receive awards in September each year);
 - Community Involvement checklist, as outlined in Section 2;
 - Two Reference Forms submitted via email by your references as outlined in Section 3;
 - An essay in English or French, or YouTube link or WeTransfer shared link (**NO Google Drive shared links**) to a 2-minute video in ASL/LSQ, as outlined in Section 4;
 - Notice of Assessment, as outlined in Section 5;
 - An education budget plan or YouTube link or WeTransfer shared link (**NO Google Drive shared links**) to a 2-minute video in ASL/LSQ, as outlined in Section 5; and,
 - Letter of Academic Accommodation related to being Deaf or hard of hearing or Individual Education Plan (IEP), outlining academic accommodations related to being Deaf or hard of hearing, as outlined in Section 6.

Selection Process

A committee of Deaf, hard of hearing, and hearing business leaders and academics review the application process each year. Scholarships are awarded based on financial and accommodation needs along with other factors such as community engagement. All winners will be notified in July 2024 and asked to submit final documents to ensure eligibility. Awards will be distributed upon receipt of proof of registration, a signed letter of consent, a successful social media background check, one-sentence bio, and thank-you video. Winners will be recognized across the Canadian Hearing Services community in September. Please note, all awards are taxable income.

How to Apply

Please complete and submit this form to submit@chsglobalpartnerships.com along with all materials **by the deadline to be considered**. Thank you.

Application Deadline: April 26, 2024, 4 p.m. E.S.T.

Successful candidates will be notified in July 2024

2024 Canadian Hearing Services National Scholarship Program

Application for First-Time Applicants

TO BE COMPLETED FULLY FOR CONSIDERATION:

SECTION 1: APPLICATION INFORMATION

Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Phone/TTY: _____

E-mail: _____

Date of Birth (MM/DD/YYYY): _____ Age: _____

Gender: Male Female Other: _____

Family Size*: 1 2 3 4 5 6 7 or more

I consider myself to be:

Deaf Hard of Hearing Deafblind

Other: _____

Which of the following best describes you?

ASL User

LSQ User

Spoken language communicator

Do you wish to self-identify as an Indigenous person in Canada?

First Nations

Métis

Inuit

Urban Indigenous

Name of post-secondary educational institution and program you plan to attend:

In September 2024, I will be a:

Full-time student

Part-time student

I am entering the following academic year:

1st year

2nd year

3rd year

4th year

Other: _____

SECTION 2: COMMUNITY INVOLVEMENT

Please provide concrete examples. Your activities may be volunteered or paid, if you participated in more than one activity of the same type, please tell us the one that you are most proud of.

Activity Type	Detailed Description (eg: started book club, volunteered, working at... etc.)	Name of the Organization (if applicable)	Impact of Activity
Community Engagement Activity Volunteer Work Employment			
Leadership Roles (if applicable)			

SECTION 3: REFERENCES

Please have two (2) professional references complete the Reference Form found on the CHS National Scholarship website at chs.ca/scholarship-program. Completed Reference Forms are to be **emailed by your references** to submit@chsglobalpartnerships.com. Examples of professional references include teacher, coach, advisor, employer, supervisor, leader from the past, etc. Please note that your reference must not be a relative or friend.

All reference forms are to be emailed to submit@chsglobalpartnerships.com **by your references no later than 4:00 p.m. E.S.T. on April 26, 2024.**

SECTION 4: ESSAY

Please describe your life experience as someone who is Deaf or hard of hearing and tell us how the scholarship will help to transform the future for you. Please include your 250-word typed essay as a **PDF on a separate page** in 12-pt. font.

Students who prefer to submit a 2-minute video in ASL or LSQ may send a YouTube link or WeTransfer shared link in your application submission email. **(NO Google Drive shared links please.)**

Please note: Essays that are longer than 250 words in print or 2 minutes in video may not be considered.

SECTION 5: FINANCIAL

a) Canadian Revenue Agency Notice of Assessment

For high school graduates: Please provide your Parent(s)'s Notice(s) of Assessment from 2023 or 2022 if the 2023 NOA is not yet available. The document must show Line 15000.

For mature students: Please provide your (and your spouse's) Notice(s) of Assessment from 2023 or 2022 if the 2023 NOA is not yet available. The document must show Line 15000.

b) Education Budget

Please tell us how you plan to pay the costs related to your education which include the budget of expenses and your available resources to cover those costs. Please include your 150-word typed budget spreadsheet/word document as a **PDF on a separate page** in 12-pt. font.

Students who prefer to submit a 2-minute video in ASL or LSQ may send a YouTube link or WeTransfer shared link in your application submission email. **(NO Google Drive shared links please.)**

Please note: Education budgets that are longer than 150 words in print or 2 minutes in video may not be considered.

SECTION 6: LETTER OF ACADEMIC ACCOMMODATION

Please attach the Letter of Academic Accommodation related to being Deaf or hard of hearing from the institution you are attending this fall. You may obtain the Letter of Academic Accommodation from your institution's Accessibility Services Office (or equivalent offices). Please ask your institution about how to request for accommodation.

If you are a recent high school graduate, you may submit your Individual Education Plan (IEP) related to being Deaf or hard of hearing from your high school instead of a Letter of Academic Accommodation from the institution you'll be attending in the Fall.

SECTION 7: REQUIRED DOCUMENTATION CHECKLIST

To submit a complete application for the 2024 scholarship, please (✓) check that you have attached the following documentation in this **exact order**. Please ensure ALL required documents are included in your application package to be considered. We will not follow up on any incomplete applications.

- #1: Completed and signed application form;
- #2: Photocopy proof of Canadian citizenship or permanent residency with date of birth;
- #3: At least one audiogram documenting hearing loss of 50dB or greater, pure tone average, in each ear (50dB or greater in the left ear AND 50dB or greater in the right ear);
- #4: Proof of Fall 2024 registration/acceptance to an accredited post-secondary institution (proof of registration, signed consent form and thank-you video are required before students receive awards in September each year);
- #5: Community Involvement Checklist, as outlined in Section 2;
- #6: Two (2) Reference Forms submitted via reference's email account as outlined in Section 3;
- #7: Essay written in English or French, or a link to a 2-minute video of the essay in ASL/LSQ, as outlined in Section 4;
- #8: Your (or your family's) Notice(s) of Assessment from 2023 or 2022, as outlined in Section 5;
- #9: Education Budget written in English or French, or a link to a 2-minute video of the Education Budget in ASL/LSQ, as outlined in Section 5; and,
- #10: A Letter of Academic Accommodation from the institution you're attending this fall or an Individual Education Plan (IEP) if you are a recent high school graduate, as outlined in Section 6.

Please send the above materials to submit@chsglobalpartnerships.com in a single PDF attachment with the subject line: "Application for 2024 Canadian Hearing Services Scholarship", **no later than 4:00 p.m. E.S.T. on April 26, 2024. Illegible and incomplete applications will not be considered.**

For additional information, please visit chs.ca/scholarship-program,
email submit@chsglobalpartnerships.com

Canadian Hearing Services gratefully acknowledges our generous donors and corporate partners for providing ongoing funding to support this important program.

Declaration of Interest

I have read the eligibility requirements and have submitted the required documentation to be considered for a national scholarship award from Canadian Hearing Services, as outlined in this application form. I understand I may only use the scholarship for tuition, residence or educational resources, and I agree that my name, personal story, video and photographs may be used for promotional purposes by Canadian Hearing Services.

Applicant / Guardian Signature: _____

Print Full Name: _____ Date (MM/DD/YYYY): _____