

ALDAcon 2018
October 10-14, 2018

SCHOLARSHIP APPLICATION

Before filling out this form, please be sure to read very carefully and in full the information flyer about the scholarship program.

Date _____

▶ Name: _____

▶ Address: _____

▶ E-Mail Address: _____

▶ Are you an ALDA Inc, Member? Y/N _____

▶ Are you a member of an ALDA Chapter or Group? Y/N ____ If so, which one?

▶ Please briefly describe your involvement in ALDA, Inc. and/or in an ALDA Chapter/Group (e.g. are you a board member?) Do you attend meetings?)

▶ Please tell us your hearing status:

Deaf ____ deafened ____ hard-of-hearing ____ hearing ____ other: _____

▶ Have you ever attended an ALDAcon? ____ If yes, which year(s)/locations(s):
_____ (Preference is always given to first time attendees)

▶ Have you ever previously received a scholarship award to attend an ALDAcon? Y/N _____

▶ If yes which year? ____ If yes, what did your award cover? _____ If you have previously applied and been accepted but did not attend please briefly explain. _____

▶ Please tell us briefly why you want to attend ALDAcon, (additional information may be added at the end of this application):

► Please describe the kind(s) of financial assistance you feel you need to attend ALDAcon, as well as the amount of help in each area you would need. (eg Full? Half?): Registration _____ Hotel (number of nights out of 4 nights total) _____ (Note: Scholarship funds cover a shared room only; help will be provided for roommate matching.) Transportation costs are not included in scholarship awards.

► To help us in our decision making please briefly describe the financial reasons you are applying for help.

Deadline for application submission is June 30, 2018

Acknowledgment of your application will be sent to you immediately upon its receipt. If you do not hear from us within 3 days of your submission of this application please contact Carolyn directly.

You will get a response from ALDA's Scholarship Committee regarding your application no later than the second week of July.

Questions or concerns regarding scholarship and applications may be sent to:

Carolyn Piper
Scholarship Chair
wicwas@wcvt.com,
82 Piper Place, Huntington, VT 05462
802 434-2452

Please include below any additional information that you feel will be helpful to us in making a decision regarding your application.