



SCHOLARSHIP FOR STUDENTS WHO ARE HARD OF HEARING OR DEAF

Academic Year 2015-2016

Deadline: May 1, 2015



HEARING CHARITIES
O F A M E R I C A
Community • Communications • Commitment

SCHOLARSHIP

This is a \$1,000 scholarship to cover tuition, books and supplies. Recipient may use the funds for any semester, including summer, during the awarded academic school year. Support from Sertoma and Oticon, Inc. provides the funding for the scholarships.

QUALIFICATIONS

- Must have a minimum 40dB bilateral hearing loss, as evidenced on audiogram by an SRT of 40dB or greater in both ears
- Must be a citizen of the United States of America
- Must be pursuing a bachelor's degree on a full-time basis at a college or university in the United States – graduate degrees, associates degrees, community colleges, and vocational programs do not qualify.
- Must have a minimum cumulative 3.2 GPA on a 4.0 un-weighted scale
 - *High School senior* – Cumulative GPA is for grades 9-11 and first semester for grade 12
 - *College freshman* – Cumulative GPA is all of high school and first semester of college
 - *College sophomore or higher* - Cumulative GPA for all college-level semesters completed

DEADLINES

All scholarship applications and requested materials must be received at Sertoma headquarters by 4:00 pm Central Standard Time on May 1st each year. Faxes are not accepted. If the deadline falls on a weekend, the following Monday will be used as the deadline date.

REQUIRED MATERIALS

The following items are required to complete the application process.

- Application - must be on the original form, typed, and signed.
- (2) Two letters of Recommendation
- High School and/or College transcript – Transcript must be from school, but does not have to be official. The school name, applicant's name, and GPA must be printed on the transcript. GPA stated on application must be verifiable from transcript. Show conversion if GPA is documented on scale other than 4.0. College freshman must include high school and college transcripts.
- Recent audiogram or statement from hearing health professional (must not be any older than five years). Hearing loss level on application must be verifiable from audiogram or statement. Decibel of hearing loss stated on application must be verifiable from audiogram in number format.
- One additional copy of the application, letters of recommendation, and transcript(s). The additional copy must blank out all references to the student's personal information including name, address, phone, email, and social security number.
- Submit all materials in a single envelope in the order listed. Any additional items or items received separately will be discarded. Application materials are to be single sided. Please do not use staples.

NOTIFICATION TO RECIPIENTS

Scholarship recipients will be notified by June 30th of each year. We only notify recipients, no notification means the student did not receive the scholarship. We cannot send out lists of recipients to those who do not receive a scholarship.

MAILING ADDRESS

Sertoma Headquarters
Hard of Hearing or Deaf Scholarship Program
1912 E. Meyer Blvd.
Kansas City, MO 64132

Sertoma will acknowledge receipt of applications by e-mail only. If you would like notification, include your e-mail address on the application. We will not notify or acknowledge receipt of application by phone.



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STUDENT INFORMATION

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Level of Hearing Loss (SRT) – Left Ear _____ dB Right Ear _____ dB

If applicant has a cochlear implant, please note CI in the above line.

COLLEGE OR UNIVERSITY INFORMATION

School the student will be attending or is currently attending on a full-time basis. If you have not determined a school or your application is pending, list your preferred school.

School Attending _____

Degree _____

Date entered (entering) college or university month / year

Anticipated date of graduation month / year Total credits required for degree _____

Estimated total credits during the 2015-16 academic year and 2016 summer term(s) _____

Estimated cost of tuition/fees/books/supplies for 2015-16 academic year \$ _____

Cumulative GPA (on an unweighted, 4.0 scale, as of completion of the Fall 2014 semester)

High School _____/4.0 Undergraduate _____/4.0

Please answer the following questions in the space provided - attachments will be discarded and the application not considered for the scholarship.

HONORS/AWARDS RECEIVED



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Please answer the following questions in the space provided - attachments will be discarded and the application not considered for the scholarship.

COMMUNITY VOLUNTEER ACTIVITIES

INTERSCHOLASTIC ACTIVITIES

EXTRACURRICULAR ACTIVITIES (include jobs held)



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PERSONAL STATEMENT (300-500 words) – Explain how this scholarship will help to achieve your goals.

By submitting this application, I have given permission to Sertoma to use my name and relevant information in all forms of publications, including, but not limited to print and web based.

Signature _____ Date _____