

## DHH BURSARIES AND GRANTS

### GUIDELINES

There are several DHH (Deaf or Hard of Hearing) bursaries and grants available and descriptions are provided below. Interested persons must complete the attached application form and submit it by the date noted. The Committee will review the applications and advise applicants as soon as possible.

**The application deadline is May 1<sup>st</sup> annually.**

**Applications for Recreational/Social/Cultural Opportunity Grants can be submitted throughout the year but must be received four (4) weeks prior to the activity.**

Return completed applications to:

**Administrative Assistant, DHH Programs**

**5940 South Street, Halifax, NS B3H 1S6**

**Fax: 902-424-1369**

**Email: [dhh@apsea.ca](mailto:dhh@apsea.ca)**

### LIST OF BURSARIES and GRANTS

#### DHH Bursary

**Amount: Maximum of up to \$2,000/applicant per fiscal year**

Awarded to encourage a student who is Deaf or hard of hearing 21 years of age or less pursuing post secondary studies and is a resident of one of the Atlantic Provinces. Selection consideration will be made based on degree of hearing levels. A maximum of twenty (20) awards at a maximum of \$2,000 each may be awarded annually.

#### Recreational/Social/Cultural Opportunity Grant

**Amount: Maximum of up to \$2,000/applicant based on application per fiscal year**

Financial support for children and youth who are Deaf or hard of hearing and their families in the Atlantic Provinces to participate in social, recreational, or cultural activities such as, and not limited to:

- American Sign Language (ASL) classes,
- ASL interpreting services (for activities outside of school events),
- Student conferences,
- Amplification and assistive technology,
- Extra curricular activities (as they relate to language and social development).

Funding is provided when there is evidence that funds are unavailable from any other source and are cost shared, where possible, by the individual. In exceptional circumstances, 100% funding may be considered. Applications must be received a minimum of four (4) weeks prior to the activity.

#### **Incentive Bursary for Professionals**

##### **Amount: Maximum of up to \$1,000/applicant**

Awarded to a professional working with or preparing to work with Deaf or hard of hearing children and youth. A maximum of three awards of up to \$1000.00 each may be awarded annually. Selection consideration will be made based on relevance to working with children and youth who are Deaf or hard of hearing; enrollment in a program leading to a certificate, diploma, and/or degree; and resident of one of the Atlantic Provinces.

#### **Research Project Grant**

##### **Amount: Variable based on application**

Grants may be awarded to support research and the development of curriculum or resources. Research/projects must be of direct benefit to the Atlantic Provinces Special Education Authority (APSEA). Maximum of up to \$5,000 may be awarded annually. Research/projects will be conducted or carried out by an APSEA employee, or a person authorized by APSEA to conduct the research. All project proposals must be approved by the Director and/or the Superintendent. The amount to be awarded shall not exceed the actual cost of the research/project (travel, supplies, mail-outs, etc.) and may include funds for salary. Funds awarded, but not used in one year, may be carried over to the next year.

#### **Professional Learning and Training Grant**

##### **Amount: Variable based on application**

Annually, an amount of \$8,000 will be available for professional learning and training to ensure that APSEA continues to meet its need for highly trained, very specialized staff with the technical skill and knowledge to meet the needs of children and youth who are Deaf or hard of hearing and are supported by APSEA. Applications for support from this fund will not be considered for staff who are on an educational leave. A candidate must have the appropriate educational and experiential background to benefit from the professional learning opportunity. A candidate must hold a position within the Atlantic Provinces where they work in an educational setting with children and youth who are Deaf or hard of hearing. Professional learning and training opportunities are to be consistent with the priorities identified in the APSEA Strategic Plan.

# APPLICATION FORM

## DHH BURSARIES AND GRANTS

**Applicant Name:**

**Home Address:**

**Email Address:**

**Phone Number:**

**Cell Number:**

### **BURSARIES AND GRANTS:**

**Which bursary or grant are you applying for? Select all that apply.**

**DHH Bursary**

**Recreational/Social/Cultural Opportunity Grant**

**Incentive Bursary for Professionals**

**Research Project Grant**

**Professional Learning & Training Grant**

**Bursary applicants, please complete the Academic Information section.**

### **ACADEMIC INFORMATION:**

Permanent Resident of Atlantic Canada.    Yes    No

Proposed Program of Study:

Educational Institution:

Year of Study:        1        2        3        4

Anticipated Date of Graduation:

Briefly outline your future career or profession:

- Additional requirements for **Bursary** applicants:
  - Copy of applicant's most recent audiogram

**Recreational/Social/Cultural Opportunity Grant, Incentive Bursary for Professionals, and Professional Learning and Training applicants, please complete the Descriptive Information section.**

**DESCRIPTIVE INFORMATION:**

Description of activity/program/ training (include date and time):

Cost of activity/ program/training (please itemize) :

Amounts contributed by other individuals or groups:

Other sources of funding explored and/or received:

Briefly outline the benefits of this activity/program/training:

Payment should be made to (complete name, mailing address including postal code):

- Additional requirements for **Research Project** applicants:
  - Provision of a research description/statement. Give a clear and concise description of the research problem, purpose, or question. The researcher should denote exactly what they intend to do and what they want to achieve with the research and how it will benefit APSEA.
  - Timeline, estimated cost, other sources of funding explored and/or received.

**I certify that the information on this application is, to the best of my knowledge, true and complete.**

**Name of Person Completing Form:**

**Relationship to Applicant (if not self):**

**Signature:**

**Date:**

**Successful applicants will be notified in writing.  
Payment will be made once all requirements are met.**

## FOR COMMITTEE USE:

<b>Application Approval</b>	
<b>Date Application Reviewed:</b>	
<b>Application Approved:</b>	<div style="display: flex; justify-content: space-around;"> <span>YES</span> <span>NO</span> </div>
<b>Amount Approved for Payment:</b>	
Additional requirements for approved <b>Bursary/Grant</b> and <b>Incentive Award</b> applicants. Must be received prior to payment.	
Letter from Admissions Office verifying enrolment, dated <b>after</b> the program has begun	
Applicant's Social Insurance Number (enter in box)	
<b>Payment Approval</b>	
<b>Signature of Director of Finance &amp; Administration:</b>	
<b>Date:</b>	