**OSSPEAC GRADUATE SCHOLARSHIP**

The Ohio School Speech Pathology Educational Audiology Coalition (OSSPEAC) is committed to fostering our profession of speech/language pathology and audiology in Ohio’s universities. The **OSSPEAC Graduate Scholarship** has been established to raise awareness among graduate students of OSSPEAC and to recognize excellence of academic and clinical skills of individuals who plan a career in the educational setting. The **OSSPEAC Graduate Scholarship** is designed to assist audiology and speech pathology students who have secured second-year graduate student status depending upon their respective university’s credit hour policy by fall 2016. The requirements are not based on financial need.

The applicant must have the following requirements and documentation to be considered:

1. verification of student having appropriate number of credit hours as of fall 2016 to have second-year graduate student status
2. verification of a 3.5 GPA or above
3. completed application form
4. one letter of recommendation from the applicant’s student teaching supervisor or clinical supervisor
5. one letter of recommendation from college or faculty members on university letterhead

The selection committee will consist of a panel of at least five reviewers including but not limited to: Scholarship/Grant Committee Chairperson, OSSPEAC Audiology Representative, OSSPEAC Speech and Language Representative, OSSPEAC Treasurer and OSSPEAC President Elect.

In addition to a $1000.00 scholarship, the student will also be awarded registration to the annual OSSPEAC conference in Columbus to be honored and recognized by OSSPEAC members.

The application form and all documentation must be submitted electronically by July 1, 2016. The selection committee will review the applications and the awardees will be notified in August 2016.

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| Scholarship Application |  |

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City State Zip Code |  |
| Home Phone |  |
| E-Mail Address |  |
| Are you an OSSPEAC member? |  |

## Academic Information

|  |  |
| --- | --- |
| University of Attendance |  |
| Current GPA |  |
| Undergraduate University of Attendance & Degree |  |
| Undergraduate GPA |  |

## Preferences

### Please describe why you prefer to work in an educational setting rather than a clinical or medical setting.

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## Skills and Strengths

### Please describe your skills and strengths that make you particularly suited to work with students who have communication needs.

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## Experience

### Please list employment or volunteer work that has involved working with students.

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## Community Service

### Please list prior or current volunteer work.

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## Considerations

### Please share any other pertinent information.

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### By submitting this application, I agree to provide the OSSPEAC Scholarship Committee a personal photograph if awarded the scholarship. Furthermore, I agree to submit a survey regarding the application and award. The survey information and photographs may be used in OSSPEAC publications.

|  |  |
| --- | --- |
| Name |  |
| Date |  |

## Submission

Please complete this application and along with the following information:

* Verification letter from a university chairperson verifying appropriate credit hours for second year graduate status as of August 2016
* Verification of GPA (must be 3.5 or above)
* Verification of academic sequence showing school placement
* One letter of recommendation from college or university faculty on university letterhead
* One letter of recommendation from a student teaching supervisor or clinical supervisor

Please scan and submit the completed application as an email attachment to [OSSPEAC@windstream.net](mailto:OSSPEAC@windstream.net).

Completed applications must be electronically submitted by **July 1, 2016**