



A committee of the Nova Scotia League for Equal Opportunities

218 Club Road, Hatchet Lake NS B3T 1R2

(P) 902.455.6942

Email: nsleo2018@outlook.com

Scholarships for Students with Disabilities

Purpose: To assist Nova Scotians with disabilities in their pursuit of post-secondary education and training.

Supported by:

Scotiabank

CIBC

RBC Financial Group

IMP Group

Casino Nova Scotia

Casino Sydney

TD Financial Group

Smith Family

Administered by:

Partnership for Access Awareness Nova Scotia (PAANS)
(A committee of the Nova Scotia League for Equal Opportunities)

Awards: **Eight** scholarships in the amount of **\$1,500.00**, **five** in the amount of **\$2,000.00**, **three** in the amount of **\$1000.00** are anticipated to be available for the academic year beginning September 2019.

Conditions: To be considered, scholarship applicants must:

- Be a person with a permanent disability. 'Permanent Disability' means a limitation that restricts the ability of a person to perform the activities necessary to participate in educational activities or in the labour force within the range considered normal. This limitation is expected to remain with the person for life;
- Be a permanent resident of Nova Scotia;
- Be entering or continuing studies, at the **undergraduate** level, in a Canadian post-secondary institution that is recognized by the Association of Universities and Colleges of Canada; and
- Not be involved in the selection process or be a close family member of any scholarship selection committee member.

Criteria:

The applications of candidates meeting the above considerations will be forwarded to the selection committee. Applications are evaluated on a number of factors including:

- Community involvement
- Extra-curricular activities
- Approach to overcoming barriers
- Academic performance

- Educational goals and direction

To Apply:

All parts of the scholarship application form must be completed in full and all supporting documentation must be included. All required documentation must be received by **MAIL, or EMAIL** to the *Partnership for Access Awareness - NS* (for address, see below) **no later than end of business day on Friday, April 26th, 2019.**

Submission of an application signifies an applicant's agreement to comply with all stated conditions of the award program. This includes permission to include recipient's name and/or image in press releases and promotional material, as well as permission to release contact information to reputable members of the press.

Applications Application forms are available through the Nova Scotia League for Equal Opportunities website: www.nsleo.com or through your guidance counselor.

Applications can be emailed or mailed to:

Partnership for Access Awareness Nova Scotia (PAANS)
C/o Nova Scotia League for Equal Opportunities
218 Club Road, Hatchet Lake NS B3T 1R2
Tel: 902.455.6942
Email: nsleo2018@outlook.com

We thank all applicants for your interest in the PAANS Scholarships, but only successful applicants will be notified of the selection results.



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**Scholarships for Students with Disabilities
Application Form**

Applicant's Name: _____

Address: _____

Postal Code _____

Telephone: _____

Email: _____

Please check the scholarships you are interested in being considered for.

Though individuals can be considered for any number of awards, recipients cannot receive more than one scholarship under this program. **Previous years' winners will not be considered. All winners must be able to attend the presentation luncheon on June 3rd in Halifax 12:00-2:00pm (Cape Breton applicants in Sydney)**

1. Sponsor: Casino Nova Scotia

Who is eligible? Students entering any year of undergraduate study at a post-secondary institution

_____ Province-wide (one award)

2. Supporter: Casino Sydney

Who is eligible? Students entering any year of undergraduate study at a post-secondary institution

_____ Residents of Cape Breton (one award)

3. Sponsor: Scotiabank

Who is eligible? Students entering any year of undergraduate study at a post-secondary institution

_____ Province-wide (four awards)

_____ Residents of Cape Breton (one award)

4. What barriers have you encountered while working toward your academic goals? How did you overcome these obstacles?

5. Describe your education and career goals. Please highlight why you are interested in pursuing this career path and what strengths you bring to your chosen path.

6. Educational institution you are currently attending (if any):

School Name: _____

Address: _____

Postal Code: _____

Telephone: _____

Current grade or year of study: _____

7. Post-secondary institution you plan to attend during the 2019 academic year:

Name of Institution: _____

Mailing Address: _____

Postal Code: _____

Degree, Certificate or Diploma you wish to obtain:

Starting Date: _____

Additional Requirements:

- Please include **two** letters of reference with this application. Ideally, the reference letters will touch on the obstacles the applicant has overcome:
 - One from a past or current teacher, guidance counselor or professor (if out of school for more than three years, a letter from an employer or case worker will be accepted)
 - One from an individual, other than a family member, who has known you for more than one year

- Please have official transcripts for the last two years of study forwarded to the application address by the submission deadline. (If you have not attended school in the past three years, please attach a resume.)

Please forward one copy of this application to:

Partnership for Access Awareness Nova Scotia (PAANS)
c/o Nova Scotia League for Equal Opportunities
218 Club Road Hatchet Lake NS B3T 1R2
Tel: 902.455.6942
Email: nsleo2018@outlook.com

Deadline: end of business day on Friday, April 26th, 2019

Falsification of any information in this application will result in disqualification of the application and/or requirement of repayment of any monies awarded. With the exception of names, images, current school attending, anticipated education program, institution of the award recipients, the information contained in this application will be held in confidence.

I certify that all information provided in this application is true and complete to the best of my knowledge. I agree to comply with all requirements and criteria of this scholarship program. This includes permission to include my name and/or image in press releases and promotional material, as well as permission to release contact information to reputable members of the press if my application is successful.

I grant Partnership for Access Awareness Nova Scotia permission to contact me in future years to follow up on my progress. YES / NO

Signature of Applicant: _____

Date: _____