

## **SDAD Youth Scholarship Program Guidelines**

The SDAD Youth Scholarship Program is designed to present opportunities for youth who are deaf and hard of hearing, age 10-21. Those opportunities may include: camps, workshops, educational events or others.

Applicants may receive scholarships based on funds available.

Eligibility is listed as follows:

- Reside and attend a school in South Dakota
- Deaf or Hard of Hearing
- Age 10-21
- Two letters of recommendation:
  - One from a current school or direct service provider
  - One from a family member (parent, guardian, foster parent, grandparent or adult sibling)

The South Dakota Foundation will review and award as deemed. First-time applicants will be given consideration over those who have previously received scholarships.

To apply:

- Submit the application form with the following:
  - Letter from the youth explaining why she/he wants to attend and participate in the event/activity
  - Letter from a family member explaining how the applicant will benefit from the event/activity
  - Letter of recommendation from his/her current school or direct service provider
  - Include a flyer or announcement with information including: date, location, registration fee, and other costs on the event/activity

All of the above five items must be submitted to the SDAD Foundation for consideration at the following address:

**SDAD Foundation  
102 N Krohn Place  
Sioux Falls, SD 57103**



# YOUTH SCHOLARSHIP APPLICATION FORM

Youth's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ Male  Female

School: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone/Text: \_\_\_\_\_

Name of Camp/Workshop/Educational event you are applying for: \_\_\_\_\_

Location: \_\_\_\_\_

Have you applied for SDAD Scholarship Program in the past? YES  NO

If yes, were you awarded? YES  NO

If yes, what year? \_\_\_\_\_

Youth' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_