

# 2019–2020 Jerry Northern Scholarship in Pediatric Audiology

## Application Deadline:

**January 15, 2020**, by  
Midnight ET

## Email submissions to:

Allyson Tanner  
Foundation Coordinator  
atanner@audiology.org

*Applicants will receive  
confirmation of application  
receipt within 48 hours of  
submission.*

## Questions?

Contact Allyson Tanner,  
Foundation Coordinator at  
703-226-1049.

The AAA Foundation is excited to announce a new scholarship opportunity for students interested in pediatric audiology. Dr. Jerry Northern has graciously donated to the Foundation to award three students with \$10,000 each in tuition funding and \$500 each for travel expenses to AAA 2020 + HearTECH Expo in New Orleans, LA.

**The Jerry Northern Scholarship in Pediatric Audiology** will be awarded to full-time graduate students enrolled in an audiology (AuD, PhD, AuD/PhD) program and in good standing at a U.S. university during the 2019–2020 academic year. Applicants must be in at least their second academic year in the graduate program and have completed at least one course in pediatric audiology.

Applications are due by **January 15, 2020**. A committee of audiologists will review application materials, and award notification will be made by **February 15, 2020**.

## Terms and Requirements

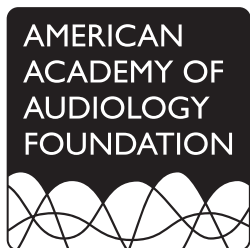
Applicants are required to submit the following:

- 1. Completed application** (page 2)
- 2. Resume/CV:** Includes accomplishments in the following areas: clinical skills and experiences, and leadership and service activities as they relate to clinical work with a focus on pediatric audiology. Please include your grade point average, as well as the university's grading scale (i.e., 3.5 with maximum possible of 4 or 3.9 with maximum possible of 5).
- 3. Two letters of recommendation from faculty and a clinical preceptor** (at least one letter from someone familiar with student's clinical acumen in pediatrics). Letters must address:
  - a. How long the writer has known the applicant and the nature of the relationship with the applicant
  - b. The qualities, particularly with respect to patient/family-centered skills that provided the basis for your support of this application
  - c. How the applicant's clinical ability compares to other students whom the writer has known at the same stage of the clinical program
  - d. Ability to apply academic coursework in clinical situations
- 4. Personal statement:** Describe qualities you believe are characteristic of an outstanding pediatric audiologist and discuss your personal goals for becoming a future clinician. In addition, without violating patient confidentiality, describe a specific situation in pediatrics that you feel inspired or solidified your passion for this specialty. (750 words maximum)

**NOTE: Please read the submission criteria carefully. ONLY send the information requested above; applicants who send unrequested documentation may be disqualified from consideration.**

Scholarship recipients who are in attendance at AAA 2020 + HearTECH Expo are strongly encouraged to attend Foundation functions during the meeting to meet supporters of the Foundation's scholarship programs.

For more information, contact Allyson Tanner, foundation coordinator, at 703-226-1049 or atanner@audiology.org.



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## Personal Information

FIRST NAME

MIDDLE NAME

LAST NAME

HOME ADDRESS

CITY

STATE

ZIP

TELEPHONE

EMAIL

UNIVERSITY NAME

DEGREE SOUGHT

**Year (for 2019–2020):**     2nd     3rd     4th     5th     6th

**Anticipated Month/Year of Graduation:** \_\_\_\_\_

Yes, I have attached the following as detailed on the application information.

- Completed application
- Resume/CV
- Two letters of recommendation
- Personal statement

Yes, I have read the Jerry Northern Scholarship in Pediatric Audiology information and agree to abide by all terms. I also understand that the AAA Foundation reserves all rights to use the information I provide in this application in any and all promotional materials.

Please check here if you would like this application to also be considered for the 2020/2021 academic year scholarship cycle (no need to submit an additional application).

SIGNATURE

DATE

## Chair/Head or Program Director Nomination

I \_\_\_\_\_ (print name) have read the description of the Jerry Northern Scholarship in Pediatric Audiology and understand that my department is nominating:

PRINT NAME STUDENT TO BE CONSIDERED FOR THIS SCHOLARSHIP

SIGNATURE

TELEPHONE

EMAIL