**Application Process**

**Applicant:**

* Complete all sections of the Course 591 Scholarship application form. The form may be downloaded from [www.cincinnatidyslexia.org](http://www.cincinnatidyslexia.org)
* Email the following Course 591 documents to ovbidascholarship@gmail.com
	+ Completed Scholarship application form
	+ Current resume
	+ Names and contact information of three professional references

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

* Applications and accompanying documents must be received on or before the following deadlines:
	+ **January Class: Preceding October 1**
	+ **June or July Classes: Preceding March 1**

**APPLICATIONS RECEIVED AFTER DEADLINE WILL NOT BE CONSIDERED**

Award notifications will be sent via email, on or before October 31 (for the January class) and March 31 (for the June and July classes).

**Important:** Applying for or being awarded an OVBIDA scholarship does not constitute a registration for the Mayerson Academy course. Applicants must register with Mayerson Academy in order to attend a course. Scholarship awards are paid directly to Mayerson Academy.

**Application for Scholarship**

**January, June or July Course in Multisensory Reading Practicum I (591)**

**Mayerson Academy**

The cost of the course and materials is $1,299.00, payable to Mayerson Academy. Scholarships will be awarded in the amount of $600.00 Scholarships must be approved by the Ohio Valley Branch of the International Dyslexia Association. Scholarship eligibility is limited to applicants who are currently and actively engaged in the following professions: Teachers, Intervention Specialists, Speech Language Therapists, Reading Specialists and Psychologists.

 **It is still necessary to register for this course with Mayerson Academy.**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bachelor’s Degree: Major\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Graduation Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Teaching Assignment (Grade Level/School)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*Please include a current resume and the names of three references with contact information.** **Your application will NOT be processed without this information.**

Reason for Interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I prefer to attend:­­ \_\_ January 2017 \_\_June 2017 \_\_July 2017

**Email application packet to: ovbidascholarship@gmail.com**

**DEADLINE FOR APPLYING FOR JANUARY CLASS IS OCTOBER 1, 2016**

**DEADLINE FOR APPLYING FOR JUNE OR JULY CLASS IS MARCH 1, 2017**

+++++++ I agree that if for any reason I fail to complete this course, I will **REPAY THE FULL AMOUNT** of the scholarship awarded to me by the Ohio Valley Branch of the International Dyslexia Association.

**Signed ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**