



SAA Special Olympics Healthy Hearing Chapter Participation Grants Application Information

Two Application Deadlines Annually: February 1 at Midnight ET

In 2010, the Student Academy of Audiology (SAA) officially announced its relationship with the Special Olympics Healthy Hearing (SOHH) program as a national service project. The SAA is encouraging university chapter participation in SOHH programs throughout the country to support the goals of 1) increasing the number of student volunteers involved with hearing screenings and 2) improving the audiologic follow-up of athletes after the games.

The American Academy of Audiology Foundation SAA Special Olympics Healthy Hearing Chapter Participation Grants program provides funding that enables students from SAA chapters to serve as volunteers at SOHH events at the local, regional, and state levels. These grants supplement chapter fundraising activities and partially cover costs of travel and supplies.

Only SAA chapters may apply for funding; no awards will be made to individual students.

Chapters may apply for funding for more than one SOHH event (i.e.: for both local and state events), but the maximum amount of monies awarded is \$250.00 per academic year.

A committee of audiologists will review application materials, and award notification will be made by March 15 respectively.

Chapters are required to submit the following:

1. Completed application (attached)
2. Completed budget form part 1 and part 2 (attached)
3. A list of chapter members who will participate at the SOHH event. Please note that any chapter with 100% membership in both the local and national SAA will receive additional consideration as applications are evaluated.

NOTE: Please read the submission criteria carefully. ONLY send the information requested above; chapters that send unrequested documentation may be disqualified from consideration. Special consideration will be given to applications which include sufficient budget information and which include a contribution to the budget from the chapter's fundraising activities.

For more information, contact Rachael Sifuentes, SAA Operations Manager
at 703.226.1048 or rsifuentes@audiology.org.

SAA Special Olympics Healthy Hearing Chapter Participation Grants
Application Deadline: February 1 at Midnight ET

Chapter Information

Chapter Name: _____ Chapter City: _____

Contact Name: _____

Contact Address: _____

Contact Phone: _____ Contact Email: _____

SOHH Event Information

Note: If a chapter is applying for funding for participation in SO Games at more than one location, a separate application must be made for each event. Maximum award/s per chapter per year: \$ 250.00

SOHH Location: _____ SOHH Date: _____

Number of students participating: _____ Grant amount requested: \$ _____

Award Information

If awarded funds, make check payable to: _____

Send check to:
(Name) _____

(Address) _____

Yes, I have attached:

Completed application

Completed budget form part 1 and part 2

List of chapter members participating in the SOHH event

Yes, I have read the attached "SAA Special Olympics Healthy Hearing Chapter Participation Grants Application 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.

Yes, the information included in this application is correct to the best of my knowledge.

Chapter President Name: _____ Signature: _____ Date: _____

Chapter Advisor Name: _____ Signature: _____ Date: _____

Email completed application to:

Rachael Sifuentes

rsifuentes@audiology.org 703-226-1048

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





**SAA Special Olympics Healthy Hearing Chapter Participation Grants
Budget Form Part 1**

Chapter Name: _____ Chapter City: _____

SOHH Location: _____ SOHH Date: _____

Round Trip Distance: _____ Number of Student Participants: _____

Number of vehicles to be used (note if alternate form of transportation is required): _____

Budget:

Total hotel cost \$ _____

Total gas cost \$ _____

Total cost for supplies \$ _____

Other \$ _____

TOTAL ESTIMATED COST \$ _____

Amount raised (or anticipated) from chapter fundraisers: \$ _____

Amount requested from AAA Foundation: \$ _____

