

OLIVER MARTIN MEMORIAL TRUST FUND ASSESSMENT SCHOLARSHIP APPLICATION

NAME OF STUDENT/CHILD		D.O.B.		CURRENT GRADE	
HOME ADDRESS		CITY		Province/Postal Code	
School Board		Name of School			
NAME OF PERSON COMPLETING THE APPLICATION					
ADDRESS OF PERSON COMPLETING THE APPLICATION					
HOME PHONE NUMBER		CELL NUMBER		WORK NUMBER	
EMAIL ADDRESS		RELATIONSHIP TO THE APPLICANT			

My CHILD LIVES WITH (Please list all people living in the house with your child)

GIVE A SUMMARY OF YOUR CONCERNS/LEARNING DIFFICULTIES EXPERIENCED BY YOUR CHILD

EXPLAIN WHY A SCHOLARSHIP IS NEEDED (Statement of need)

Lined area for writing the statement of need.

OLIVER MARTIN MEMORIAL TRUST FUND ASSESSMENT SCHOLARSHIP QUESTIONNAIRE FOR APPLICANTS	
Does your child have a formal diagnosis (e.g., Autism, ADHD, Learning Disability, Developmental or Physical Disability)?	
Does your child have a medical condition or a diagnosis?	
Did your child suffer a stroke, traumatic, brain injury or recurrent seizures?	
Does a family history of a learning disability or difficulties with learning to read exist in your family? If yes please explain.	
How old was your child when they first started using single words? How old when they first started using phrases?	
Does your family speak a language other than English at home?	
If yes, what other languages are spoken in the home?	
Can your child understand the language used in the home? Please describe any difficulties.	
Can your child use the language of the home to communicate effectively? Please describe any difficulties.	
When did you first become concerned about your child's reading/writing skills?	
What were your primary concerns?	
Is your child's school concerned?	
Has your child received failing grades (i.e., grade R) on his or her report card for reading/writing?	

Is your child on an Individualized Education Plan (IEP)? If so for what subjects?	
Has your child been assessed by the school Speech-Language Pathologist or Psychologist?	
If your child has been assessed what were the recommendations?	
Is your child receiving support at school for his or her reading and writing? If so what type of support?	
Is your child placed in a special education setting/class? (i.e., has been through the IPRC process)	
What do you hope to gain from the assessment?	