



January 15, 2017

Dear University Colleague:

The Communication Disorders Foundation (CDF) of Virginia is pleased to sponsor one \$3,000 student scholarship (Rita Purcell-Robertson Scholarship) and one \$1,500 student scholarship (David H. Narburgh Scholarship) which will be awarded based on available funding. The scholarships will be awarded to two current or rising master's students in Audiology or Speech-Language Pathology enrolled in one of the following universities in Virginia: Hampton University, James Madison University, Longwood University, Old Dominion University, Radford University, or the University of Virginia. The scholarships are designed to recognize students who have demonstrated outstanding **clinical potential**. Last year's scholarship recipients were Taylor Miller, James Madison University, Rita Purcell-Robertson Scholarship; and Megan Bell, Radford University, David H. Narburgh Scholarship.

The application packet is included as an attachment to the current e-mail message and is also available on our website at [www.cdfvirginia.org](http://www.cdfvirginia.org) The student applicant must:

1. Complete the application form,
2. Solicit three recommendations to be completed on the enclosed forms, and
3. Answer the three questions contained in the packet.

Scholarship requirements:

- The student applicant must be a full-time graduate student during the 2017-2018 school year. If the student plans to graduate in December 2017, then full-time attendance during the Fall of 2017 is required. The scholarship will be forfeited if the student does not attend the school of record as a full-time student.
- The completed application must be postmarked by **April 15, 2017**.
- All documents are to be mailed to CDF **in one envelope**.
- The student is encouraged to obtain at least one recommendation from an individual who has observed the student's clinical and/or academic skills or has noted personal qualities that predict clinical potential.
- No more than one of the three recommendations may be from someone other than a clinical supervisor or academic instructor: for example, a non-family member who knows the applicant well and can speak to character, initiative, and commitment.
- **Incomplete packets will not be considered**. To be considered complete, a packet must include the application form, three recommendation letters (**including both Parts A and B**), and the applicant's response to the three provided questions. Additionally, the student must follow all instructions for completing the application packet and its contents and do so by the deadline.

Award decisions will be finalized in the Summer of 2017 and the winners will be notified by e-mail. An announcement of the award decisions will be posted on or after July 10 on [www.cdfvirginia.org](http://www.cdfvirginia.org)

Please help us to increase exposure regarding the availability of these scholarships by disseminating this letter, the attached Scholarship Announcement, and application packet to those who will be full-time master's students in Fall 2017 at your university. Thank you for helping us to recognize outstanding clinical potential in the graduate students of Virginia. If you have any questions, please feel free to contact me.

Sincerely,

*Peggy Agee*

Peggy C. Agee, SLPD, CCC-SLP  
CDF Scholarship Committee  
E-mail: [ageepc@longwood.edu](mailto:ageepc@longwood.edu)



## **ANNOUNCEMENT**

### **CDF GRADUATE STUDENT SCHOLARSHIPS AVAILABLE**

The Communication Disorders Foundation of Virginia (CDF) is pleased to offer one \$3,000 graduate student scholarship (Rita Purcell-Robertson Scholarship) and one \$1,500 graduate student scholarship (David H. Narburgh Scholarship) for the 2017-2018 academic year. These scholarships will be awarded based on available funding. These scholarships are designed to recognize students who have demonstrated outstanding clinical potential. The two awards will be granted to current or rising master's degree students in Speech-Language Pathology or Audiology enrolled in one of the following universities in Virginia: Hampton University, James Madison University, Longwood University, Old Dominion University, Radford University, or the University of Virginia. For application requirements and additional information, please contact the clinic director/NSSLHA faculty advisor at your school, visit [www.cdfvirginia.org](http://www.cdfvirginia.org), or contact Dr. Peggy C. Agee, CDF Scholarship Committee, by e-mail at [ageepc@longwood.edu](mailto:ageepc@longwood.edu)

**Application Deadline: April 15, 2017**

Checklist of items needed for scholarship:

- Completed application form
- Three letters of recommendation (in sealed envelopes signed across the seal by the recommender). The student is encouraged to obtain at least one recommendation from an individual who has observed the student's clinical and/or academic skills or has noted personal qualities that predict clinical potential. No more than one recommendation may be from someone other than an academic or clinical instructor. For example, the student may request a recommendation from a non-family member who knows the applicant well.
- Responses to the three questions contained in the current application packet

**PLEASE CHECK ALL DOCUMENTATION FOR ACCURACY  
PLACE ALL ITEMS IN ONE ENVELOPE AND MAIL TO:**

**Dr. Peggy C. Agee  
CDF Scholarship Committee  
Longwood University  
201 High Street, Speech, Hearing, and Learning Services  
Farmville, VA 23909**



## STUDENT SCHOLARSHIP APPLICATION FORM

Name \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_

University presently attending \_\_\_\_\_

University attending in 2017-2018 \_\_\_\_\_

Expected date of graduation from master's degree program \_\_\_\_\_

Full-time status 2017- 2018?  yes  no

Currently a master's student?  yes  no

Please provide the following information regarding the persons providing recommendations:

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_

2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_

3) Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_

Please answer the following questions and enclose your answers along with the remaining items from the scholarship application packet. **DO NOT mention the name of your current or previous university in your responses to questions.**

1. How did you choose the profession of audiology or speech-language pathology?
2. If funds/resources were not an issue, what topic or area of study would you pursue to improve your effectiveness and knowledge as a communication disorders specialist?
3. What do you think are your professional obligations as a practicing audiologist or speech-language pathologist? What would you like to contribute to your profession?



APPLICANT'S NAME \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

In the space below, comment on the applicant's strengths as identified in the scale on the previous page.

\_\_\_\_\_  
Recommender's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Position and/or Relationship to Student

*For further questions, please contact:*

*Peggy C. Agee, SLPD, CCC-SLP  
CDF Scholarship Committee  
E-mail: [ageepc@longwood.edu](mailto:ageepc@longwood.edu)*