

2010 AEI SUMMER INSTITUTE
"SPOKEN LANGUAGE DEVELOPMENT IN THE CLASSROOM"

Alabama Department of Education

SCHOLARSHIP APPLICATION

Name: _____ Occupation: _____

Number of Hearing Impaired children served: _____

Employer/ (School System): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: **(REQUIRED)** _____

Phone (H): _____ (W): _____

Fax: _____

Do you need any special devices to participate (FM devices, etc.)?

If so, please specify: _____

Scholarships are limited to 30 participants and will be awarded based on letter of application and in order of receipt by AEI.

Applicants will be notified by e-mail of their acceptance into the Institute **by April 20, 2010**. Directions and other appropriate information will be sent to you at this time.

REQUIRED LETTER: Please include a one-page letter stating why you wish to attend the Institute, including your level of experience in the Auditory-Verbal / Auditory-Oral approaches to spoken language development. Please list any specific questions/areas of need that you would like to have addressed during the institute.

_____ Yes, I would like scholarship assistance

Signature

Date

Please return to:
Alabama Ear Institute
300 Office Park Drive, Suite 210
Birmingham, AL 35223

Attn: Harry Wooten