

The Donald E. Curran Scholarship

History

The Donald E. Curran Scholarship was created by the many friends and admirers of Donald E. Curran, the founder and first Executive Director of the Atlantic Division of CPA and CPA (NS). He served as ED from 1952 to 1984.

Upon his retirement, the Scholarship was established as a legacy to his accomplishments that included his appointment as a member of the Order of Canada. Since its creation the scholarship has given nearly \$200,000 to qualifying candidates.

Eligibility

Applications are accepted from any person with a mobility disability, with preference given to persons with spinal cord injury. They must be attending a post secondary school (university, college, technical school) in the Atlantic Provinces. The scholarships will be awarded on merit, academic standing and on such other criteria as the Selection Committee may determine. Recipients must be Canadian citizens or landed immigrants, and residents of the Atlantic Provinces.

Value & Number of the Award(s)

The maximum value of the scholarship is \$1500.00 annually and up to eight scholarships will be awarded annually.

Payment of Awards

Funds will be awarded through the appropriate University Department to selected applicants. However, payment will not be made until the applicant has provided a letter of confirmation from the Registrar of the particular institution. Transcripts or pre-registration notifications are not acceptable as confirmation of attending the relevant University year. Students will receive their contributions in two instalments, the first half upon receipt of the letter of registration from the institution, and the second half after January 1st after the receipt of a transcript of the first term grades indicating continuing attendance.

Procedure for Applicant

Application forms can be obtained by visiting www.thespine.ca or by calling Lorna Griffin-Fillier RSW at 1800-889-1889. Completed applications must be received by July 31st. Applicants can reapply.

University Year

For the purposes of this program, the University year shall be defined as commencing on September 1st and ending on August 31st of the following year. Request for deferment will be considered only in unusual circumstances and the decision will be made by the Selection Committee. In the event that a student does not complete the academic term, they must submit to the Committee a medical report stating the inability to complete the full course load in order to be eligible for the second half of the scholarship.

Disclaimer

The Selection Committee has the right to cancel any award before payment is made or to take recovery action on contributions already made where the applicant has failed to meet the conditions herein or by leaving the institution in which they were enrolled. It must be clearly understood that students selected as eligible for these scholarships shall comply with all conditions and requirements contained herein before any payment will be issued.

APPLICATION

Donald E. Curran Scholarship Fund

Canadian Paraplegic Association (Nova Scotia)

Please submit by **July 31st** and send completed application, along with supporting documentation to:

Donald E. Curran Scholarship Fund
c/o Canadian Paraplegic Association (NS)
Suite 317A Tower One-Halifax Shopping Centre
7001 Mumford Rd.
Halifax, NS B3L 4N9

Please Note: Falsification of information may result in automatic rejection of application.

(Please Print)

Name: _____

Address: _____

Postal Code: _____

Telephone: _____ **Email:** _____

Date & Place of Birth: _____

M/D/Y

City/Town

Province

Canadian Citizenship By: Birth _____ Naturalization _____

Note: If by naturalization, a photocopy of your certificate must be attached to your application

Landed Immigrant: _____

Marital Status: _____ **Social Insurance Number:** _____

Disability (Classification/Type & Extent): _____

Name & Address of Medical Doctor you have requested to confirm the details of this disability:

Are you or have you been the recipient of another award, scholarship or bursary? _____

If so, please list: _____

Hobbies & Interests: _____

Employment History: *(please list)*

Employer	Address	Date	Position
----------	---------	------	----------

Thank you very much for applying and best of luck with your studies!

Lorna Griffin-Fillier RSW
Manager of Client Services
Scholarship Selection Committee
Canadian Paraplegic Association (Nova Scotia)