

Youth/Young Adult and Family/Caregiver Scholarships

Penn Stater Conference Center, State College, PA - July 22-24, 2009

General Information

Scholarship Availability

A limited number of scholarships will be available on a first-come, first-served basis, for youth and young adults with disabilities and/or families and caregivers, based upon financial need. Please provide complete information, as the Conference Committee will carefully review each application.

During the conference, it is expected that both youth/young adults and family/caregivers will be attending sessions. This year sessions have been identified as "Family Engaging" and/or "Youth Engaging" to assist you in selecting sessions of interest.

Conference Registration

In addition to completing the scholarship application, each person must also complete a conference registration form in order to attend the conference. PaTTAN encourages all participants to register on-line by following the instructions below:

1. Go to the PaTTAN website: www.pattan.net.
2. Click on the 2009 Community on Transition Conference under the "What's New" section.
3. Click the box of each of the breakout sessions you would like to attend.
4. Please make sure you complete your on-line registration entirely.
5. Your last step will be to click the "Submit Registration" button.
6. YOU MUST CLICK THE SUBMIT REGISTRATION BUTTON OR YOUR REGISTRATION WILL NOT BE PROCESSED.
7. You will then receive a confirmation. If you do not receive a confirmation and have entered a valid email address, then you have not registered successfully and will need to start registration over.

To obtain an electronic copy of the brochure, please visit www.pattan.net or www.sharedwork.org/patransition or contact PaTTAN at 800-446-5607.

A paper copy of the registration form can be mailed or faxed to Mary Gordon, PaTTAN-Pittsburgh, 3190 William Pitt Way, Pittsburgh, PA 15238 or fax - 412-826-1964.

The deadline for conference registration is July 6, 2009.

Scholarship Reimbursement

If selected, you will be sent a confirmation letter with a reimbursement form. The scholarship will cover the following expenses:

Lodging: The scholarship covers the cost of one hotel room at a double occupancy rate for Tuesday, Wednesday and Thursday nights, July 21, 22, and 23, 2009. All youth/young adults and/or families/caregivers who are provided a scholarship will have their hotel reservations made for them at a hotel located near the conference site. This scholarship only covers the cost of the hotel room; other hotel costs are the responsibility of the scholarship recipient (i.e. phone charges, room service, etc.).

Registration: The conference registration fee of \$125.00 will be waived for each family member and/or youth receiving a scholarship.

Please note you will be responsible for: Evening meal expenses and travel costs

Application Deadline

The deadline for scholarship application is **June 23, 2009** in order for you to be considered in the selection process. You will be notified of your selection status by **June 30, 2009**. Please mail or fax completed scholarship application to: Marty Rist, PaTTAN-Pittsburgh, 3190 William Pitt Way, Pittsburgh, PA 15238 or fax to 412-826-1964.

Family, Youth/Young Adult Scholarship Application

Application Deadline: June 23, 2009



**Pennsylvania
Community on Transition Conference**

July 22-24, 2009

(Please complete one application per family)

- I am a youth or young adult with a disability between the ages of 14 & 24.
- I am a family member or caregiver of a transition-aged youth or young adult with a disability between the ages of 12 and 24 and will be attending the conference

Youth/Young Adult Attending Conference:

Applicant Name:			
Address:			
City/State/Zip			
Phone/TTY:		Cell Phone:	
Email Address:			
I have applied to be a presenter at the conference	<input type="checkbox"/> Yes <input type="checkbox"/> No	Session Title:	

My primary disability is: _____ (please indicate)

Youth/Young Adult is currently receiving services from:

County Mental Retardation/Developmental Disabilities _____

Office of Vocational Rehabilitation _____

Family/Care Giver Attending Conference

Name of Parent/Guardian(s)/ Family Member attending:			
Name of Caregiver attending :	If other than parent/guardian	Relationship:	
Address:	if different from youth/ young adult		
City/State/Zip:			
Phone/TTY:		Cell Phone:	
Email Address:			
I have applied to be a presenter at the conference	<input type="checkbox"/> Yes <input type="checkbox"/> No	Session Title:	

Reasonable Accommodation Requests:

If you need accommodations to participate as required by the Americans with Disabilities Act, please complete the following section:		
	Youth/Young Adult	Family Member/Caregiver
Sign Language Interpreter		
Tactile Interpreter		
Wheelchair Access		
Alternative Formats		
Braille		
Large Print		
Disk		
Special Dietary Requests		
Vegan		
Gluten-Free		
Other: please specify		

Consent

- We would be unable to attend this conference without the scholarship funds available and I believe I can obtain valuable information at the conference that will help me achieve at least one of the following post-secondary outcomes: employment; post-secondary education, training and lifelong learning; community participation; and/or healthy lifestyles.
- I am under the age of 21, and therefore a family member or caregiver must accompany me and attend the conference.

Youth/Young Adult Signature:

Date:

- My son/daughter is under the age of 21 and may participate in the *2009 Pennsylvania Community on Transition Conference* in State College on July 22-24, 2009 and will have a family member/care giver supervising and being responsible for him/her throughout the conference.

Family Member/Caregiver/Guardian Signature:

Date:

- Name of family member/caregiver who will be attending/supervising youth/young adult at the conference:

(please print)

Please return this completed form by June 23, 2009 to:
 Marty Rist
 PaTTAN Pittsburgh
 3190 William Pitt Way
 Pittsburgh, PA 15238
 FAX: (412) 826-1964,
 Phone: (412) 826-6830
 mrisk@pattan.net