

Wrightslaw Scholarship Application

This scholarship is only available to parents/caregivers of children with disabilities.

If you receive the scholarship, all registration fees will be waived! This generous offer is being brought to you by these sponsors:

- SoonerSUCCESS
- The Oklahoma Parents Center
- Oklahoma Autism Center
- Down Syndrome Association of Oklahoma



Please understand that this scholarship is for parents of children with disabilities. By filling out this form, you declare that you have a child with a disability who is currently on an IEP, IFSP, or a Section 504 Plan.

Participants who do not receive a scholarship to attend the conference and do not cancel will not be eligible for a scholarship for future conferences. So, please contact us if you are unable to attend to allow another participant the opportunity to receive a scholarship.

* 1. Parent/Caregiver Information:

| | |
|-----------------|----------------------|
| Name | <input type="text"/> |
| Address | <input type="text"/> |
| Address 2 | <input type="text"/> |
| City/Town | <input type="text"/> |
| State/Province | <input type="text"/> |
| ZIP/Postal Code | <input type="text"/> |
| Email Address | <input type="text"/> |
| Phone Number | <input type="text"/> |

* 2. Name of your child

*** 3. Primary disability of your child**

- | | |
|---|---|
| <input type="radio"/> Autism | <input type="radio"/> Multiple Disabilities |
| <input type="radio"/> Deaf-blindness | <input type="radio"/> Orthopedic Impairment |
| <input type="radio"/> Deafness | <input type="radio"/> Other Health Impairment |
| <input type="radio"/> Hearing Impairment | <input type="radio"/> Specific Learning Disability |
| <input type="radio"/> Developmental Delay (Early Childhood) | <input type="radio"/> Speech or Language Impairment |
| <input type="radio"/> Emotional Disturbance | <input type="radio"/> Traumatic Brain Injury |
| <input type="radio"/> Intellectual Disability | <input type="radio"/> Visual Impairment including Blindness |

*** 4. Age of your child**

- | | |
|---|---|
| <input type="radio"/> Birth up to age 3 | <input type="radio"/> Ages 12 through 14 |
| <input type="radio"/> Ages 3 through 5 | <input type="radio"/> Ages 15 through graduation or age out |
| <input type="radio"/> Ages 6 through 11 | <input type="radio"/> Beyond high school graduation (or aged out) |

*** 5. Reason for Need:**

Must be received by November 19th, 2019!

For more information, please contact: Latisha Coats @ 405-712-8050 or lcoats@oklahomaparentscenter.org.

