

[**www.deafnesscouncilwa.org.au**](http://www.deafnesscouncilwa.org.au/)

Deafness Council WA

**Stan Perron Charitable Foundation Scholarship**

**2025**

***APPLICATION FORM***

NAME OF INDIVIDUAL **AND/OR** ORGANISATION:

ADDRESS:

DATE OF BIRTH:

DATE ORGANISATION ESTABLISHED (if applicable):

CONTACT DETAILS:

* Ph:
* Mob:
* Email:

TYPE OF HEARING LOSS OF INDIVIDUAL **OR** ORGANISATION’S MEMBERS:

Please include where necessary

* Pre/Post Lingual Hearing Loss
* Degree of Hearing Loss
* Unilateral/Bilateral Hearing Loss
* Otitis Media/Sensory Neural Loss

METHOD OF COMMUNICATION

* e.g. Auslan, Spoken English, Both, Other

ORGANISATION CHARTER/CONSTITUTION

* if applicable

PROGRAM/SUPPORT PROPOSED:

COSTS OF PROGRAM/SUPPORT:

USE OF SCHOLARSHIP FUNDS:

HOW WILL THIS ASSIST IN DEVELOPING THE INDIVIDUAL AND/OR ORGANISATION’S SKILLS?

**All submissions must be received by 5pm on November 30th, 2025. These can be sent by email to** **contact@deafnesscouncilwa.org.au** **or posted to PO Box 1388, South Perth WA 6951.**