



2024 Everyday Lives Conference Scholarship Application

The Pennsylvania Developmental Disabilities Council is offering scholarships to the 2024 Everyday Lives Conference on January 9-11, 2024. You must be a person with a disability or a family member to get a scholarship.

There are a very limited number of scholarships. If you work for or represent a disability organization, please ask if they can pay for you. This way we can offer scholarships to people with the most need.

What Will the Scholarship Pay For?

The scholarships may cover the following costs:

- 1. Conference Registration fee.**
- 2. Hotel if you live more than 50 miles away.**
- 3. Travel to and from the hotel.**
 - You must live more than 50 miles away.**
 - Mileage is the government rate OR Coach tickets for a bus, train or plane.**
 - Tolls**
- 4. Some meals.**
 - Meals that are not provided at the conference.**
 - Only for people staying at the hotel overnight.**
 - Limit per day is \$30.**

You can apply for yourself and up to two other people, like family members or staff, who are coming with you.

When is the Deadline to Apply?

The application deadline is November 27, 2023. You will be notified about scholarships during the month of December.

Additional Details

To be eligible for a scholarship:

you must live in Pennsylvania, AND be at least one of the following:

- Person with a developmental disability**
- Family member or guardian of a person with a developmental disability**

Travel and Reimbursement Eligibility Requirements

The Council may pay for the following:

- A hotel only if the event is more than 50 miles from your home.**
- Milage, at the government approved rate at the time of the event.**
- Train, bus or airfare cost for coach class tickets only.**
- Up to \$30 per day for meals - Only meals that are not part of the event AND only**

if you are staying overnight.

We will give you a preloaded visa card at the conference. It will have money to pay for any approved meal and transportation costs.

What if I don't get a scholarship?

There are a limited number of scholarships. If you do not get a scholarship, we will contact you in December. You can still register and pay online or at the conference. You can make room reservations at the Hershey Lodge.

To receive a discounted rate, you must make the reservations before December 11, 2023.



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Application Questions

Please complete the following questions to be considered for a scholarship:

1. Contact Information

First and Last Name	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
ZIP Code	<input type="text"/>
County	<input type="text"/>
Email Address	<input type="text"/>
Cell Phone	<input type="text"/>

2. What is your preferred contact method:

- ☐ Email
- ☐ Phone Call
- ☐ Text Message

3. Are you a family member?

- ☐ Yes
- ☐ No

4. Are you a Self-Advocate?

- ☐ Yes
☐ No

5. Are you a Direct Support Professional ?

- ☐ Yes
☐ No

6. Have you ever attended the Everyday Lives Conference in-person?

- ☐ Yes
☐ No

7. What days do you plan to attend the conference?

- ☐ January 9, 2024
☐ January 10, 2024
☐ January 11, 2024

8. Will anyone else be attending with you? Please include name and relationship (Family Member, Direct Support Staff, Self-Advocate). Please share rooms if possible. Rooms come with two beds in most cases.

Attendee 1 Name	<input type="text"/>
Relationship	<input type="text"/>
Needs Seperate Room? (Yes/No)	<input type="text"/>
Attendee 2 Name	<input type="text"/>
Relationship	<input type="text"/>
Needs Seperate Room? (Yes/No)	<input type="text"/>
Attendee 3 Name	<input type="text"/>
Relationship	<input type="text"/>
Needs Seperate Room? (Yes/No)	<input type="text"/>

9. Do you need an accessible room?

- ☐ Yes
☐ No

10. If you need more than one room, do the rooms need to be adjoining?

- ☐ Yes
- ☐ No

11. How will you use the information and resources to improve the everyday life for yourself or your loved one?

12. If you work in the disability field, does your employer offer financial support for you to attend? If yes, what expenses is your employer covering?

- ☐ No
- ☐ Yes (please list covered expenses)

13. How many miles will you be traveling to the Hershey Lodge?

Hotel Address: 325 University Drive, Hershey PA 17033

- ☐ Less than 50 Miles
- ☐ Over 50 Miles
- ☐ How many miles will you be traveling if over 50 miles?



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Transportation Questions

14. Do you receive services that will cover the cost of transportation?

- ☐ Yes
- ☐ No

15. If you are traveling more than 50 miles to attend the conference, what mode of transportation are you using?

- ☐ Car
- ☐ Bus
- ☐ Train
- ☐ Plane
- ☐ Other (please specify)

16. If traveling by car AND you are traveling more than 50 miles to attend the conference, will you be taking toll roads?

- ☐ No
- ☐ Yes - please list the expected cost of tolls

17. If traveling by bus, train, or plane, AND you are traveling more than 50 miles to attend the conference, what is the cost of a round-trip ticket?

18. Which nights do you plan to stay at the hotel?

- The Council may pay up to 3 nights. You will be responsible for paying for any additional nights. The conference is 1/9, 1/10, and 1/11.

- ☐ 1/8
- ☐ 1/9
- ☐ 1/10
- ☐ 1/11
- ☐ 1/12

19. Do you need any assistance arranging your travel plans?

- ☐ Yes
- ☐ No



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Registration Questions

Reasonable efforts will be made to accommodate special requests, however we may not be able to accommodate all requests.

20. If you need accommodations to participate in the conference, please complete the following section:

- ☐ Sign Language Interpreter
- ☐ Closed Captioning for Presentations
- ☐ Presentations in a language other than English (Please list language needed in "other")
- ☐ Other (please specify)

21. Dietary Restrictions:

- ☐ Vegetarian
- ☐ Vegan
- ☐ Gluten Free
- ☐ Other (please specify)



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Conditions of Scholarship

* 22. As a Scholarship Recipient, I consent to the below statements:

- ☐ I would be unable to attend this conference without the scholarship funds and I believe I can obtain valuable information at the conference that will help me in assisting myself or my family member.
- ☐ I am an individual with a disability or a family member of an individual with a disability who lives in Pennsylvania.
- ☐ I am not an employee or representative of a disability-related organization that is able to cover the costs for me to attend the conference.
- ☐ I agree to complete and return a post-conference survey to the Council.
- ☐ If I receive a scholarship and cannot attend the conference, I agree to notify the scholarship organizers as soon as possible by calling PAR at (717)-236-2374.
- ☐ The conference will include optional Move Your Way activities. By checking this box, I confirm that my participation in any Move Your Way physical activities during the conference is voluntary, and I am aware of any risks such physical activities may involve. I understand that it is a good practice to consult with a physician prior to participation in any physical activities or exercise.