

Ben's Fund Autism Grant Instruction Page Young Adult

Ben's Fund provides support to Washington state families in need to help cover costs associated with therapies, equipment and numerous other aspects of supporting a young adult on the autism spectrum. Ben's Fund grants are available for up to \$1,000 per qualifying young adult, per award year. Please contact info@bensfund.org with any additional questions.

To apply, please complete the application in accordance with the following grant instructions and mail to:

Ben's Fund
PO Box 1317
Bellevue, WA 98009

Grant Eligibility

- Must have a documented autism spectrum diagnosis.
- Age of applicant must be 25 yrs. of age or younger.
- Your place of residence must be a Washington state address.
- Have financial need, indicated by financial documents and extenuating circumstances.
- The requested equipment or service must be directly related to the child's autism treatment.
- If you have health insurance, you are still eligible for this grant.

Grants Assist Children and Young Adults with Autism Gain Access to:

- **Therapies:** ABA, OT, PT, Speech, etc.
- **Therapeutic Equipment:** iPads, Computers, Equipment to increase social and life skills etc.
- **Safety Equipment:** Personal & home safety, etc.
- **Services:** College, Social Skills, Job Training
- **Camps:** Seasonal

Additional Information

- Preference will be given to families showing financial need. Extenuating circumstances are considered.
- Items not covered under this grant include: Respite, autism diagnostic appointments, travel, reimbursements, gift cards, medication not administered by a physician, or for past due services that you are no longer receiving.
- All iPads are purchased directly through Apple Inc., and require a case and Apple Care+. Visit our website for iPad pack options.
- Once your application is received and processed, you will be notified via email.
- If complete, your application will be sent for review at the next monthly Ben's Fund Committee meeting. You will be contacted via email of a decision. Please allow an estimated 45-60 days to process your complete application.
- If incomplete, we will contact you for required documentation. If not completed by 6 months, the application will expire and you will need to fully reapply.
- Further documentation may be requested and submitting an application does not guarantee an award.
- If eligible, you may be awarded once every 12 months from date of previous award.
- If awarded, funds will go directly to the service provider, vendor, retailer or organization listed on the grant application. Funds will not be paid directly to the family.
- Once awarded your request cannot change.
- We cannot register the applicant for services. You must pre-register and make payment arrangements before you apply.

I understand that false or misleading information in my application may result in losing my grant if awarded, being required to return disbursed funds or other actions against me. If awarded a grant, The Seattle Foundation will be held harmless for any outcomes from using awarded service or equipment, nor are they responsible for additional expenses, replacement, installation, maintenance.

I understand that all funds will be sent directly to that provider/business; funds are **nontransferable**, and can ONLY be used for the specific item requested. Checks not cashed within 90 days will be canceled. If I am unable to use the funds, funds must be sent back to Ben's Fund at which point you may reapply for a different request. The equipment or services may not be used, returned or exchanged for any reason other than the intended purpose of the grant request.

I understand that submitting this application is no guarantee I will receive a grant. The Ben's Fund Review Committee reserves the right to approve or deny grants according to their policy and procedures. No applicants will be discriminated against on the basis of his/her race, sex/gender, religion/creed, physical or mental disability, marital status, national origin or other similar factors. The information provided with this application is confidential and Ben's Fund is HIPPA Compliant. *I certify that by submitting this application that I understand the terms of this grant, and that my answers are true and complete.*

Signature _____

Date _____