



Changing the Lives of Young Australians Who Use Wheelchairs

**2017 JMF Grant Application
Information Supplement**

www.jmf.com.au





What Does JMF Do?

- › The John Maclean Foundation (JMF) exists to change the lives of young Australians who use wheelchairs. Our mission is to inspire, motivate and enable these great kids to chase their dreams.
- › JMF provides support to children who experience paraplegia, quadriplegia, cerebral palsy, muscular dystrophy and similar conditions. In many cases the families are surviving on extremely low incomes and Government assistance and incurring extraordinary costs associated with the welfare of their child.
- › JMF provides financial assistance to purchase items such as new wheelchairs, vehicle and house modifications, surgery and medical assistance, computers, remedial aids or any item that improves the quality of life for the child and their family.



Grant Eligibility

All applicants need to meet the following criteria:

- › The family household income is less than \$100k
- › The recipient child must be between 3 and 18 years of age
- › In a position to use the grant immediately, should a grant be awarded.
 - If the recipient fails to do so the grant may be withdrawn.



Required Paper Work

- › Application form with **ALL** sections completed.
- › Supplier quotation, which enables JMF to immediately contact the supplier, to request an invoice, should a grant be awarded.
- › Agency (e.g. Physiotherapist) referral letter, which outlines the potential grant recipient's diagnosis and the benefits the item/s applied for will provide.



Additional Information

- › No money will be paid directly to the family.
 - Payment will be made directly to the supplier against an invoice or where part funding is provided to the authorised referring agency.
- › The John Maclean Foundation will not reimburse any money already spent.
- › As JMF funds have been raised directly from a fundraising event, the recipient and carer may be invited to attend a grant presentation ceremony.
 - Your attendance/inclusion in such events is completely voluntary.



Examples of Grants

Grants awarded for:

- › Custom fitted wheelchairs
- › vehicle and house modifications
- › surgery and medical assistance
- › modified sports equipment
- › computers, remedial aids or any item that improves the quality of life for the child and their family.

Grants not awarded for:

- › Holidays
- › Utility Bills
- › Other items that are not specifically benefiting the grant recipient



Application & Grant Process

Step 1: Submitting an application

- › Complete the JMF Grant Application Form.
- › Print , sign & send a copy of the completed form to:
jmf@360se.com.au (with your State in the subject heading)

Or post to:

**GRANT APPLICATIONS
THE JOHN MACLEAN FOUNDATION
C/- 360 SPORT AND ENTERTAINMENT
LEVEL 1, 90 ALEXANDER STREET
CROWS NEST NSW 2065**

Timeline for applications and awarding of grants for the first half 2017 round of funding is as follows:

Friday March 17, 2017 - Applications, including all required supporting material must be received. Applications received after this date will not be considered. Incomplete applications will not be considered.

Friday March 31, 2017 - Successfully applicants will be notified of any support to be offered by John Maclean Foundation. Unsuccessful applicants will also be notified, however, no further communication will be entered into regarding the successful or unsuccessful nature of the application.

Step 3: Application assessment

- › If your application matches all the qualifying criteria, and you have supplied all the required paper work, we will assign you a case number and contact the referring agent to confirm that the funds are still required.

Step 4: Receiving and using your JMF grant

- › If you have been notified that you have been awarded a grant , JMF will contact your preferred supplier to arrange an invoice. Once the invoice has been received, payment will be made directly to the Supplier within 10 working days. An EFT confirmation will be emailed to both the Supplier and the Primary Carer (if an email address has been supplied).
- › As JMF grants often result directly from fundraising events, the recipient and carer may be invited to attend a grant presentation ceremony. Your attendance/inclusion in such events is completely voluntary.
- › No money will be paid directly to the carer or the recipient.

Step 5: Providing feedback

- › After approximately 6 months, JMF will contact the Carer and conduct a quick survey to ascertain the effectiveness of the JMF Grant. With the carer's permission this information will be used to update the fundraisers directly involved with your grant, and help generate more funds for other little wheelies.



Information

Requesting more information? Have questions?

- › Please submit all requests for additional information or questions about a grant application **via email only** to jmf@360se.com.au.

The John Maclean Foundation Limited

GRANT APPLICATION

Please complete in BLOCK LETTERS using a pen



APPLICATIONS MUST BE RECEIVED NO LATER THAN 5PM AEDT FRIDAY MARCH 17, 2017

APPLICATION INFORMATION

| | | |
|---|---------------------------------|--------------------|
| Application date: | Grant application amount: AUD\$ | |
| Item Required: | | |
| Benefit the item will create for the recipient: | | |
| Item cost: AUD\$ | | |
| Funds raised so far: | Family Contributions: | Local Fundraising: |
| | Local Authority: | Other Sources: |
| Has the recipient ever applied for a JMF grant before: YES NO (Please circle) | | |
| Has the recipient ever received a grant from JMF before? YES NO (Please circle) | | |
| If yes, please provide details. | | |

RECIPIENT INFORMATION

| | | |
|------------------------------|---|-----------------------------|
| First Name: | Surname: | Also known as: |
| Date of birth: DD/MM/YY | Current Age: | FEMALE MALE (Please circle) |
| Child's Condition/Diagnosis: | | |
| Nationality: | Residential status: PERMANENT VISITOR (Please circle) | |

GUARDIAN / PRIMARY CARER INFORMATION

| | | |
|---|------------------------------|-------------------------|
| MR MS MISS MRS (Please circle) | First Name: | Surname: |
| Relationship to recipient: | | |
| Does the recipient live with you on a permanent basis? YES NO (Please circle) | | |
| Annual Household Income: | | No. dependents: |
| Employment Status: PART-TIME FULL-TIME SELF EMPLOYED UNEMPLOYED (Please circle) | | |
| Street Address: | | |
| City: | State: | Postal Code: |
| Country: | OWNED RENTED (Please circle) | |
| Email: | | |
| Landline: | Mobile: | Preferred time to call: |
| Preferred method of contact: LANDLINE MOBILE EMAIL (Please circle) | | |

REFERRING AUTHORISED AGENCY COMPANY INFORMATION

A Referring Authorised Agency is the term we use to describe an organisation which is applying for the funds on behalf of the recipient and supporting the recipient in preparation of the grant and will provide feedback following the grant. (e.g. a Physiotherapist)

| | | |
|-----------------|----------|--------------|
| Company name: | | |
| Postal Address: | | |
| City: | State: | Postal Code: |
| Country: | Website: | |

REFERRING AUTHORISED AGENCY CONTACT INFORMATION

| | | |
|--------------------------------|-------------|----------|
| MR MS MISS MRS (Please circle) | First Name: | Surname: |
|--------------------------------|-------------|----------|

The John Maclean Foundation Limited

GRANT APPLICATION

Please complete in BLOCK LETTERS using a pen



APPLICATIONS MUST BE RECEIVED NO LATER THAN 5PM AEDT FRIDAY MARCH 17, 2017

| | | | |
|--|------------------|--------------|-----------------|
| Phone: | E-mail: | | |
| Job Title: | | | |
| EQUIPMENT SUPPLIER INFORMATION | | | |
| Company name: | | | |
| Postal address: | | | |
| City/Suburb: | State: | Postal code: | |
| Country: | Website: | | |
| Phone: | ABN/ACN: | | |
| Contact first name: | Contact surname: | | |
| USE IN PROMOTIONAL MATERIALS | | | |
| From time to time we include details or images of grants on our website, emails or other promotional materials. If you would be willing for your grant to be featured in our promotional materials in the future please indicate your willingness here. | | | |
| Details: | YES | NO | (Please circle) |
| Images: | YES | NO | (Please circle) |
| DECLARATION | | | |
| I confirm the information on this form is correct and complete to the best of my knowledge and belief. I understand that if I misrepresent or fail to inform The John Maclean Foundation on any matter that may be of relevance to the grant application this will be in breach of this agreement and may result in any offer of a grant being withdrawn. I am in a position to use the grant and will be able to send an invoice within 3 months, should a grant be awarded, and understand that should I fail to do so the grant may be withdrawn. I understand that no money will be paid directly to me and that The John Maclean Foundation will not reimburse any money that I have already spent. Payment will be made directly to the supplier against an invoice or where part funding is provided to the authorised referring agency. Please note the application cannot be process unless signed and dated by the child's parent/primary carer. | | | |
| Signature of Parent/Primary Carer: | | Date: | |
| PAPERWORK CHECK | | | |
| <input type="checkbox"/> Signed application form – Please ensure ALL sections within the application form have been completed. | | | |
| <input type="checkbox"/> Supplier quotation - which enables JMF to immediately contact the equipment supplier, to request an invoice, should a grant be awarded. | | | |
| <input type="checkbox"/> Agency referral letter – A letter, from the person nominated as the Referring Authorised Agency Contact on this form, outlining the diagnosis and the benefits the item/s applied for will provide. | | | |

Please scan your application and email it to jmf@360se.com.au

If you are unable to scan an email your application please send via post:
GRANT APPLICATIONS | THE JOHN MACLEAN FOUNDATION |
C/- 360 SPORT AND ENTERTAINMENT, LEVEL 1, 90 ALEXANDER STREET CROWS NEST NSW 2065

| | | | |
|---|--|--|--|
| APPLICATION FEEDBACK | | | |
| Where did you hear about JMF? | | | |
| How easy is it to understand the Grant Application and Approval Process? DIFFICULT AVERAGE EASY (Please circle) | | | |
| Please provide us with your feedback on the Grant Application Form: | | | |

The John Maclean Foundation Limited
GRANT MARKETING CONSENT
Please complete in BLOCK LETTERS using a pen



| GRANT FAMILY CONSENT FORM | | |
|--|--------|--------------|
| Family name: | | |
| Postal address: | | |
| City/Suburb: | State: | Postal code: |
| Phone: | | |
| USE IN PROMOTIONAL MATERIALS | | |
| <p>From time to time we include details or images of grants on our website, emails and other promotional materials. This type of promotion assists in raising awareness of The John Maclean Foundation and what we do to change the lives of young Australians in wheelchairs. This awareness helps us raise more money to be able to help more families, like yourself, around Australia. If you would be willing for your grant to be featured in our promotional materials in the future please indicate your willingness here.</p> | | |
| Please Sign Here: | | |