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# THE LANEY JAYMES FOUNDATION

## ADAPTIVE EQUIPMENT GRANT APPLICATION

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Date: \_\_\_\_\_ Child's name: \_\_\_\_\_ Child's DOB \_\_\_\_\_

Child's diagnosis \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of parent(s)/legal guardian(s): \_\_\_\_\_

Parent/Guardian email address: \_\_\_\_\_

Parent/Guardian phone numbers: \_\_\_\_\_

Home address: \_\_\_\_\_

Name of person completing application: \_\_\_\_\_

Relation to child: \_\_\_\_\_ Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Referred to LJF by: \_\_\_\_\_

Parents/Guardian occupation & place of employment: \_\_\_\_\_

Household yearly income: \_\_\_\_\_ Number of dependents: \_\_\_\_\_

Type of health insurance: \_\_\_\_\_

Has the family ever received assistance from LJF in the past? \_\_\_\_\_

Description of adaptive equipment requested \_\_\_\_\_

Please provide a brief description of the child's situation, the family's ability and willingness to participate financially in the purchase, and any other sources of financial assistance and the amount. Please feel free to attach additional pieces of paper if you need more room.



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How will this equipment improve the quality of life for the child and/or family?

\_\_\_\_\_

\_\_\_\_\_

If funding is approved, we will request photographs of child with equipment -- preferably within a month of project completion. Please submit photos via e-mail to [laneyjaymes@gmail.com](mailto:laneyjaymes@gmail.com) OR mail to address above. The Laney Jaymes Foundation may use photographs of the child on its website or in marketing materials. By completing this application, you are consenting to the use of such photos by The Laney Jaymes Foundation.

Signature is required of all legal guardians: I (We) stipulate that the information included in this application is true to the best of my (our) knowledge.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian

Date

### The Laney Jaymes Foundation Application Checklist

The following items must be included with your application. Please email all items to [laneyjaymes@gmail.com](mailto:laneyjaymes@gmail.com) or mail all items to: The Laney Jaymes Foundation, 131 Archwood Ave. Annapolis, MD 21401.

Letter(s) of verification from professionals (therapist, doctor, social worker) who are most familiar with your child's needs. This letter should clearly specify your child's needs for the



LANEY JAYMES  
FOUNDATION FOR PEDIATRIC STROKE

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equipment requested and benefits of use. Please include as much detail as possible and provide professional's e-mail address, phone number and mailing address.

Two detailed, itemized quotes from suppliers that state the equipment, all additional components necessary to make the equipment a perfect fit for your child, and total cost. (LJF can assist you in choosing a supplier; no quotes are necessary for Special Tomato products).

The Laney Jaymes Foundation is a proud supporter of Special Tomato adaptive equipment. Please visit [www.specialtomato.com](http://www.specialtomato.com).

Recent photo of the child

Child's weight: \_\_\_\_\_ Child's height: \_\_\_\_\_ Child's inseam \_\_\_\_\_

