

Oregon Center for Children and Youth with Special Health Needs
Sidney and Lillian Zetosch Fund
of the Oregon Community Foundation

June 2017

This is a DRAFT for planning purposes. Final information and application instructions will be posted at www.occyshn.org in August 2017. Application criteria and questions may change.

FUND PURPOSE

This fund was established with a gift to the Oregon Community Foundation from the estate of Sidney and Lillian Zetosch. The intent of this charitable gift fund is to help Oregon children **with special health needs succeed in school**. OCCYSHN uses the funds to buy educational equipment for children who meet the criteria.

CRITERIA

Oregon children age 3-21 years qualify if they have a **diagnosed** disability or special health need which impacts their **education**. The child must be eligible for (or enrolled in) school or Early Childhood Special Education. The child's family must be **low-income** (see application for details), and the equipment requested must specifically address **educational** need. *NOTE: Eligibility for special education is not sufficient to qualify, if there is no diagnosed health condition.* Awards are based on a number of factors, including need, location, and availability of funds.

RESTRICTIONS

- Limit of \$1500 per child per year.
- Justification must describe how the requested equipment specifically addresses educational needs.
- **Family members may not apply** directly on behalf of children. Application may be made by someone who works with the child in a professional capacity (e.g. teacher, educational service provider, disability service provider, health care provider, etc.).
- Only certain types of equipment are available. (See "Equipment" below.)
- Repeat awards considered after three years. (For example, a child who received equipment in 2014 could apply again in 2017.)

EQUIPMENT

Equipment is limited to Apple iPod, iPad, iPad Mini, and apps. (MacBook Air laptops are available to children over 12 for whom a tablet does not meet the educational need.) An AppleCare warranty is required, as is an Otterbox brand case for iPods and tablets.

Every child will get the least expensive version of the equipment unless that version is nearly obsolete, in which case they will get the least expensive newer option.

Requests for apps must be itemized. They are fulfilled with an iTunes card in the exact amount of the app costs.

WHEN TO APPLY

Applications are accepted for the month of November. Purchasing takes place in December/January. If

there are funds left over after all the approved applications are fulfilled, we will reopen the application opportunity in March.

HOW TO APPLY

Application is made via a secure online survey. The link can be found at XXXX. No mailed, faxed, or emailed applications are accepted.

The questions on the application are on page XX of this document. It's easiest to complete the application in one sitting. (It's not impossible to get back in to an incomplete application, but it is slightly complicated. If you exit the survey before submitting the application, you are given a code, which you are then required to enter in order to continue.)

Attachments are not allowed, meaning you can't attach a report to provide the educational justification.

SHIPPING

Equipment ships to the work address of the Requestor (the person who applied on behalf of the child). It will be addressed to the Requestor, followed by the child's initials (e.g. Jane Q. Smith for AB).

HELPING CHILDREN USE THEIR NEW EQUIPMENT

Requestors are expected to help children and/or their families set up and start using equipment purchased with Zetosch funds. If apps are purchased, the family may need help redeeming the iTunes card for the apps. They may also need guidance on how to use the apps to address their child's educational needs.

Equipment purchased with Zetosch funds is the property of the child and family. It does not belong to the person who applied on behalf of the child, or to his or her employer.

QUESTIONS?

Contact Gillian Freney. Email: freneyg@ohsu. Phone: 503.494.8618

SEE PAGE THREE FOR APPLICATION QUESTIONS

APPLICATION QUESTIONS

(Application can only be made via an online survey: XXX LINK). Best to organize all information before beginning, so that you can complete the application in one sitting.

1. Date
2. Requestor Name
3. Requestor Job Title
4. Professional Relationship to Child
5. Requestor Work Phone
6. Requestor Cell Phone (optional)
7. Requestor Email Address
8. Backup Professional Contact (Name, Phone, Email. Someone at your place of employment, in case you are not available.)
9. Requestor Place of Employment
10. Requestor Work Address (Street address. No PO Boxes.)
11. Child's Name
12. Child's Date of Birth
13. Child's Diagnosis (or diagnoses)
14. Child's County of Residence
15. Which Device (iPad, iPad Mini, iPod, MacBook)
16. Apps
17. Case
18. How does this child's health condition impact his or her education?
19. How will the requested equipment help address this child's educational needs?
20. To the best of your knowledge, is this child's family unable to afford this equipment? (Indicators may include: receiving public assistance, eligible for public health insurance, insecure housing, food, transportation or health care.)
21. Your confirmation that the information you've provided is true to the best of your knowledge.
22. Your confirmation that the child's parent or guardian is aware that you are applying for equipment on the child's behalf.
23. Your confirmation that you understand any awarded equipment will belong to the child/family.
24. Your commitment to helping the child/family get started with using the equipment for educational purposes.