

EMPOWERED

KAT6A FOUNDATION

Please completely review the following information before filling out the application.

The KAT6A Foundation's Empowered Grant applications will be accepted beginning December 1st, 2020. Applications received and approved will be acknowledged by email & submitted to lottery for the awards granted. Incomplete applications will not be considered for award.

What does an Empowered grant provide?

It provides funding to the applicant for the purchase of assistive equipment and technology. Assistive equipment includes but is not limited to: iPads, AAC software, AAC applications, gait trainers, adaptive switches, weighted blankets, eye glasses, feeding tools, and therapeutic swings. One item per family will be funded in order to support as many families as possible. Purchases must be made on or after the date that the application is selected. **The maximum grant amount is \$599.99 USD.**

What are the eligibility requirements?

1. The individual you are applying for must have a diagnosis of a KAT6A or KAT6B gene mutation. Genetics report including the gene mutation must be attached to application.
2. The individual must have developmental delays that require assistive equipment. Proof of developmental delays must be attached, such as an IEP report.
3. The individual does not have a parent or guardian on the KAT6A Foundation Board of Directors.
4. The individual was not rewarded an Empowered Grant in 2020.

Does the person need to live in the USA?

No. This campaign supports ALL members of our international community.

When is the application deadline?

The application deadline is **January 31, 2021**. Applications received after the deadline will be kept on file and may be eligible for reimbursement in January 2022.

How will families know if their application has been approved?

Families will be informed when their complete application has been received via email. Qualified applications will be kept on file and reviewed as funds become available for distribution. If more applications are received than we have funds to provide for, qualified applicants will be placed in a lottery and will be contacted and notified if they have been selected. Qualified applicants not chosen in the lottery will stay on file and will not need to reapply at the next grant deadline.

How will you verify information on submitted applications?

The KAT6A Foundation may call providers stated on the application and submitted reports to verify information. By signing the application, you give the KAT6A Foundation permission to contact stated providers.

How should I purchase my equipment?

If your application is selected, you will be notified by email and can go ahead and purchase your equipment. After ordering your equipment, you will need to email us a copy of your receipt for reimbursement. We will be able to reimburse by check to your home mailing address, or through PayPal in the US. Residents living outside of the US, can be reimbursed through bank wire transfer or PayPal. **Your receipt must be provided to the KAT6A Foundation within 60 days of receiving the grant notification email.** If the receipt is not submitted, you will automatically forfeit your grant and another applicant will be selected.

Do you have a question on how to apply?

Email KAT6Aempowered@gmail.com.



Empowered Grant Application

Applicant Information

Section 1:

Today's Date: _____

Full Name of Individual Diagnosed with a KAT6A or KAT6B Gene Mutation:

First Last Middle

Date of Birth: _____

Full Name of Parent/Guardian Completing Application:

First Last Middle

Address:

Street Address Apartment/Unit #

City State Country ZIP Code

Phone: _____ Email: _____

Section 2: Please list the specific item name and model that you are seeking funding for and the purpose of purchasing it. This item must be educational, therapeutic, adaptive or assistive to the individual utilizing it. This includes technology software for AAC (augmentative and alternative communication) as well as AAC apps.

What is the price of this equipment? _____

Link to this item from the website you plan to order it from. Please copy and paste this link from your web browser.

I certify that the individual's medical insurance does not cover the cost of this equipment. This box must be checked for application to be approved.

Provider Information

Section 3:

Name of Diagnosing Doctor: (You must provide the KAT6A or KAT6B gene mutation report.)

First _____ *Last* _____
Name of Practice or Hospital: _____

Address: _____
Street Address _____ *Apartment/Unit #* _____

City _____ *State* _____ *Country* _____ *ZIP Code* _____

Phone: _____ Email: _____

Name of Therapist/Specialist Treating Individual: (i.e. speech pathologist, physical therapist, occupational therapist, feeding therapist, vision therapist, neurologist, or special education teacher). You must provide recent documentation such as an IEP report, PCP, progress report, or other summary of therapy provided that shows there is a need for the assistive equipment or technology.

First _____ *Last* _____
Name of Practice or School: _____

Address: _____
Street Address _____ *Apartment/Unit #* _____

City _____ *State* _____ *Country* _____ *ZIP Code* _____

Phone: _____ Email: _____

The above information is freely given to process this application request. By signing, I attest that all information included is true and accurate and I give the KAT6A Foundation, Inc permission to contact my dependent's medical providers listed to verify and discuss diagnosis and developmental disabilities. I understand that falsifying information will immediately disqualify this application. I understand that the equipment reimbursement is a maximum of \$599.99 USD.

Parent/Guardian Signature: _____ Date: _____

This application cannot be considered until this form is completed, signed and all supporting documents are received. The information included in this application is confidential and for the KAT6A Foundation, Inc use only. Please keep a copy for your records.

Email completed application and supporting documentation confirming individual's genetic diagnosis and therapy report to KAT6Aempowered@gmail.com.