



Eligibility Requirements for Quality of Life Grants

- Quality of Life Grants are awarded to paraplegics and quadriplegics paralyzed due to spinal cord injury
- Applicants must demonstrate financial need and may be required to provide documentation
- Applicants must request specific modifications, equipment, therapy, medical expenses, etc. (Examples include upgrade and maintenance of wheelchairs, vehicle modifications, transportation costs, small home modifications, computers, and other adaptive equipment.)
- Grants are disbursed directly to suppliers of the desired equipment or modifications
- Individuals applying for the grant are required to submit estimates from potential suppliers
- There is NO age requirement associated with grant eligibility



Grant Application

Applicant Name:

Date of Birth:

Home Address:

Email:

Phone Number:

Date of Injury:

Level of Injury:

Cause of Injury:

Please answer the following questions to the best of your ability:

In a brief statement, please tell us about yourself and some of your interests:

Please give us an idea of what a typical day is like for you:



Describe your sources of financial support (SSI, Employment, Other Grants):

Describe any additional factors that may affect your grant request (Health Factors, Living Arrangements, Other Issues):

Please provide a detailed description of the equipment or modifications for which you are applying:

Please provide any contact information you have regarding the companies or contractors you have reached out to for estimates on equipment or modifications.

- 1.
- 2.
- 3.



Disclosures

- Grant decisions are made quarterly
- Each application is reviewed by the Board of Trustees and Thomas E. Smith Foundation (TESF) Advisors
- Additional information may be requested by the Foundation regarding applicant circumstances
- Individual grants have a maximum amount of \$25,000
- The TEF acknowledges confidentiality and integrity in regards to applicant financial and personal information.

Please certify that the information included in this application is accurate to the best of your knowledge and ability as of the date signed below.

Signature:

Date: