

# On the Spectrum, Inc. Grant Application

Please fill out completely and submit between *June 1 and June 30*. Applications received before or after these dates will not be processed.

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Person filling out form: \_\_\_\_\_ Relationship: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Have you received a grant from On the Spectrum before? \_\_\_\_\_

If so, when? \_\_\_\_\_ How did you hear about the grant? \_\_\_\_\_

\_\_\_\_\_

Briefly describe the individual and how the goods or services will directly benefit the physical, emotional, or psychological well-being of the individual on the Autism Spectrum. \*The individual MUST reside in Wisconsin.\*

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\_\_\_\_\_



# Provider/Company/Recipient Information

(Where the Grant will be sent)

Provider/Company/Recipient Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_

## Additional Information:

1. If possible, attach photograph, brochures, or catalog information related to your grant proposal.
2. On the Spectrum, Inc., will only pay the grant monies directly to the provider of service or to the company to purchase requested items stated on the submitted grant form.
3. At no time will the funds be reimbursed to the individual or family requesting the grant or transferred to any other individual, family, provider, etc.
4. I understand that any misleading or falsification of information will disqualify the individual and family from the grant and any future grants given by On the Spectrum, Inc.
5. On the Spectrum, Inc., has the right to confirm and validate information pertaining to the individual's application.
6. Please attach an additional sheet or send more information by email if necessary.
7. I certify that I understand the terms and conditions of the On the Spectrum, Inc., grant application and all the information provided is completed to the best of my knowledge.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail or email application to:

On the Spectrum, Inc.  
P.O. Box 147  
Kewaskum, WI 53040

onthespectrum168@gmail.com

