



Sophia's Fund Application Guidelines



Sophia Care Foundation is a federal registered not-for-profit organization that is to relieve families with children with developmental disabilities by offering grants to different therapies. The Foundation will support children with developmental disabilities by providing financial grants for essential therapies, ability enhancement and parent workshops.

Our goal is to eliminate some of the obstacles that make every day living difficult and discover the potential of each individual with a disability. Sophia Care Foundation provides financial assistance through equipment, programs and services that include, but are not limited to ABA/IBA therapy, respite services, Music Therapy classes, Afterschool Program, Winter/Summer camps, field trips, etc.

Application Eligibility

- The recipient must be 25 years of age or younger
- Applicant must be a Canadian citizen or have permanent residency in Canada
- Funding is granted to a child diagnosed with a developmental disability (i.e. Autism Spectrum Disorder, ADHD, Down Syndrome, Epilepsy, Selective Mutism, Aphasia, etc)
- The family's combined gross household income must be \$80,000 or less. Exception to income will be considered if a support letter is submitted.

Checklist of documents

- Complete the application for Financial Assistance Application Form
- A photocopy of your child's Canadian birth certificate or permanent residence card
- A detailed copy of diagnosis by a Canadian Medical Practitioner of your child's disability
- A letter telling us about your child and why you need financial assistance
- A copy of your most recent Notice of Assessment(s) from Canada Revenue Agency
- A copy of ACSD, CCTB, ODSP must be included with application if applicable.

Granting policies

- The Application for Financial Assistance Form must be submitted and approved prior to the services/programs received
- If any information is missing or the application is incomplete, it will be returned for completion, resulting in a delay in processing the request
- All application information must be true and free of error. Sophia Care Foundation reserves the right to revoke approved funding if any application information is found to be false
- Applicants must contact Sophia Care Foundation should any application information change during the course of application
- The ability to fund all eligible applications received is conditional on the availability of funds. Should there be insufficient funds at the time of the application, a waiting list will be employed
- Payment is made to the vendor, not the family
- Funding will be granted in the form of programs and services that Sophia Care Foundation recognized
- Granting policies may be changed by Sophia Care Foundation at any time without notice



AUTHORIZATION / RELEASE FOR PHOTOS



We love to receive photos, drawings, and notes from the families that we assist. It is important for Sophia Care Foundation to be able to communicate with our supporters and donors. We feature stories of children in our newsletter.

We are required to have a photo of your child for our confidential records and to aid us in monitoring the quality of our service. Please let us know if Sophia Care Foundation may use photos and artwork of your child, notes, child's first name, age, and nature of their illness for awareness and promotional purposes. **Applications received without a picture may experience a delay in processing.**

Please indicate where Sophia Care Foundation may or may not use any thank you letters and/or photos you send to us. **If your letter is used, only first names will appear. Any last names or addresses will not be used.**

- Yes _____ No _____ Newspaper articles
- Yes _____ No _____ Newsletters
- Yes _____ No _____ Letters to our donors
- Yes _____ No _____ Social Marketing sites (Facebook, Twitter, Website)
- Yes _____ No _____ Corporate Plaques/Sponsorships
- Yes _____ No _____ Would you be interested in receiving emails from Gifted People Services?
- Yes _____ No _____ Would you be interested in speaking occasionally about your Sophia Care Foundation experience at fundraising events or with media to benefit GPS?
- Yes _____ No _____ Sophia Care Foundation sometimes receives access to funds or services from Community Programs and Partners. To apply for these funds or services, we may be required to provide them with your child's personal information. Will you allow us to share your child's information with these organizations if it could be of benefit to you?

Please note that your consent is not mandatory. We respect the privacy of each person in our program. This form makes it easier for us to know which photos and stories we are able to use. Thank you for your participation.

Child's Name

Name of Parent/Legal Guardian (please print) Signature

Date



Sophia's Fund Application Form



Information about Child/Recipient

Name: _____ Date of Birth: _____
First Name Last Name Month Day Year

Address: _____
City Province Postal Code

Telephone: _____ E-mail address: _____

Diagnosis: _____

Have you previously received funding from us? Yes, Year: _____ No

Information about Parent/Guardian

Name: _____ Relationship to the applicant: _____

Marital Status: Married Divorced/separated Common-law Single Widow

Other Household members

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

List all the programs and services for which financial assistance is being requested

Services

- ABA/IBI
- Piano Classes
- Drawing Classes
- Sensory Program

Groups

- Social Skills
- Parents Training
- _____
- _____

Equipment

- Piano
- _____
- _____



Other funding sources you have:

Employer Extended Health Care Benefits Yes No

Mail your application with all required documentation to:

**Sophia Care Foundation
50 Acadia Ave. Unit 103, Markham ON L3R 0B3**

Or

Scan your application with all the required documentations to program@giftedpeopleser.org

Sophia Care Foundation would like to assist all families in need, regrettably demands are extensive and diverse and we must have criteria limitations on certain requests.

Confidentiality Policy

The Sophia Care Foundation (Foundation) is committed to protecting the privacy and the confidentiality of the personal information collected by Foundation. Foundation makes every effort to ensure that any individual's personal information is protected and properly handled. The information you provide on this application is only used for the purpose of determining eligibility. It is reviewed and handled by only those designated and authorized to do so within the Sophia Care Foundation office. If your application is granted and a file is created, your secure file will be stored at our office location for seven years (for audit purposes) before being shredded. Minimal information is also kept indefinitely on our secure database.