APPLICATION FOR EDUCATIONAL EQUIPMENT
Supported by The Sidney & Lillian Zetosch Fund of the Oregon Community Foundation

WHAT: This fund was created in 1976 to provide money to organizations to support the purchase of educational equipment for children with disabilities living in low-income households. The Oregon Community Foundation administers the funds on behalf of the Sidney and Lillian Zetosch Estate. For children who meet the criteria, the AT Lab uses the funds to buy educational equipment that is not readily covered by **school systems, medical insurance, or county/state funding** (such as K-Plan). The funds also cover free initial training and support by the AT Lab after equipment is received, as well as up to two hours of support for equipment selection.

Educational equipment examples: communication tools, mounting systems, keyboards, laptops, tablets & cases, apps/software, mobility equipment or parts, sensory or cognitive supports, adaptive play, or other tools that support educational goals at home and at school. Awards are up to **$1000** per person, per year.

WHO: All Oregon children aged 0-21 years qualify if they have a diagnosed disability or special health need that impacts their education (a physical, developmental, mental health, or behavioral diagnosis). The child must be enrolled in school, Early Childhood Special Education, or other preschool. The child's family must qualify according to financial guidelines in the application and the equipment must address educational needs.

HOW: Submit: 1) Application, 2) Letter explaining why the item(s) is needed or what type of equipment you need help selecting, and 3) Vendor quote (if applicable). The letter can be written by a doctor, therapist, specialist, teacher, or other school staff who knows what will help the child become successful in school, and who can provide equipment support if needed. Those with children or students who identify as Black, Brown, and/or Indigenous are encouraged to apply.

WHEN: Applications to the AT Lab for Zetosch funds are rolling for 2021. We will make decisions within 2-3 weeks of application receipt. Please email, fax, or mail application to:

Assistive Technology Lab at Community Vision
2475 SE Ladd Avenue, Suite 240
Portland, OR 97214
FAX: 971-350-3386
EMAIL: zetosch@cvision.org

Questions? 503-292-4964 x152 or atlab@cvision.org

Assistive Technology Lab
COMMUNITY VISION

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Family Information

Parent(s): _____ Child: _____

Date of Birth: _____ Diagnosis: _____

Address: _____ City: _____ Zip: _____

Email: _____ Phone: _____

Requesting support to help select equipment? (up to 2 hours is available)   Yes _____   No_____

If yes, briefly explain: _____

Equipment Requested (if known): _____

Cost $_____ (Attach Quote - vendor name, model #, photos, etc.)

Financial Information (Check all that apply)
- ❏ Family at or below federal poverty level
- ❏ Family receives aid through SNAP or TANF
- ❏ Child receives Free and Reduced Lunch or is in Foster Care
- ❏ Child qualifies for SSI and/or financially qualifies for Medicaid assistance
- ❏ None of the above, but can demonstrate significant financial hardship
- ❏ If child qualifies for K-Plan, funds have been denied for this equipment by DD
- ❏ Other: _____

Race/Ethnicity of Child (Check all that apply)
- ❏ Black/African American
- ❏ Asian American
- ❏ Native American
- ❏ Hispanic/Latinx
- ❏ Native Hawaiian/Pacific Islander
- ❏ White
- ❏ Multi-Racial
- ❏ Other _____

School System
School Name: _____ School District: _____

Therapist/Teacher/Specialist Name (who can provide support): _____

Person Writing Attached Letter (on letterhead with contact info): _____

Person Submitting Application: _____

Contact phone: _____ Email: _____

Date received: _____