



Application for Financial Assistance for iPads

For information on Variety's guidelines, please read or download the document from our webpage www.variety.org.au/nsw, or ring 02 9819 1003 and ask for a copy to be posted to you.

Cor	mpletion of ALL QUESTIONS on this form is essential		
1.	Name of Child:		
2.	Is this child an Australian resident or citizen?		
	(all applicants MUST BE Australian citizens or residents)		
3.	Address:		
4.	Suburb: 5. State: 6. Postcode:		
7.	Date of Birth:		
8.	Disability:		
9.	Parent(s) Names:		
10.	Guardian(s)/Carer(s) Names: (if different from above)		
11.	Phone: 12. Mobile:		
13.	Email:		
14.	Number of dependent children under 18:		
15.	Ages:		
16.	Family income (net monthly): \$		
	(You MUST attach supporting documentation for verification ie: payslips)		
17.	Financial assistance (net monthly): \$		
	(You MUST attach supporting documentation for verification eg Centrelink Income Statement)		
18.	Monthly expenses (approx.): \$		
	(List main expenses with estimated costs eg Food \$1,000)		

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Are you able to make any financial contribution to this appeal?	Yes / No
If yes, how much?: \$	
4. Have you approached any other sources for financial assistance?	Yes / No
(If yes, please provide / attach details)	
25. Have you previously received assistance from Variety?	Yes / No
Please provide details of all equipment, the year it was provided and the approximate co	ost.
26. Are you interested in joining Variety? 27. If your appeal is approved, Variety may wish to publicise this to the ele	Yes / No ectronic and print media.
Are you agreeable to Variety contacting you to discuss this?	Yes / No
28. Name of the registered owner of the iPad:	
30. Delivery address of the iPad: (if different from Residential Address):	
Address:	
	

iPad options

Please note: Variety will only fund the iPad 2 16GB Wi-Fi model.

1. iPad Colour:



White **O**



Black **O**

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2. Cover:

There are 3 covers available. Please select the cover you want and then select your colour preference. **Please do not choose more than one cover.**

a. iPad Smart Cover: Apple's generic cover





Light Blue O

Green O

Pink **O**

Light Grey O

Dark Grey O

b. iGuy: Foam frame for easy gripping and padded protection



Lime (Green) O

Peacock (Blue) O

Mango (Orange) O

c. Big Grips Frame and Stand: Foam frame for easy gripping and padded protection



Green O

Grey O

Pink O

Blue O

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Due to space restrictions, please be concise with contact details. Eg. Tom Smith 0400 000 020.

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Please include supporting letters from at least two referees. These must show that the child has trialled the iPad and the apps/software, and that they are suitable. eg, Occupational therapist, principal/teacher, medical practitioner, social worker Referee 1 Name: Title: Organisation: Phone: Email: Title: Referee 2 Name: Organisation: Phone: Email: Privacy collection statement Your privacy is respected by Variety. The personal information you provide on this form (including sensitive information about the applicant's health) will be used to assess eligibility. We will not use any of your sensitive information for marketing purposes without your prior consent. By signing below you give Variety permission to contact the people who have written supporting letters for your appeal to discuss the appeal if necessary. If you have any privacy concerns or would like to verify information held about the applicant, please contact our Appeals Manager at Variety, the Children's Charity NSW. I consent to Variety collecting the information provided on this form. O Parent **O** Guardian I am the child's: Signature:

Date:

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Print name:

Please post your application. **Faxed applications are unable to be accepted.** Please check you have included the following with your application:

- O Income & financial assistance documentation
- O Two supporting letters

Submission of the application to Variety does not expressly or impliedly mean that Variety has accepted your application. Variety is under no obligation legal or otherwise to process your application to a successful conclusion. Each application will be determined on its merits, and within Variety's funding guidelines. Variety is not liable for any loss or damages whatsoever upon your application being declined.

By forwarding this application to Variety you acknowledge that any and all implied terms and conditions or warranties implied by law are excluded. You acknowledge on making this application that Variety has not made any representation, or given any promise or undertaking, as to the fitness of any equipment or product should to be supplied to you in pursuant to this application. It is solely for you to determine whether the equipment or product being sought is fit for its purposes. Variety is neither the Vendor nor the supplier of any equipment or product. Accordingly, Variety will not be responsible for any direct or consequential loss or damage arising or related in any way to this application or its subject matter.

If you have any queries, please contact Variety's Appeals Manager Deb Gibbons on 02 9819 1003, email: appeals@varietynsw.org.au

Please post completed form with all relevant information to:

Variety, the Children's Charity NSW

Locked Bag 1044

ROZELLE NSW 2039