

I am a professional applying on behalf of a family. Yes No

Child's details

First Name..... Surname

Date of Birth Female Male (please tick)

Parent/primary carer details

Mr/Mrs/Ms (Please circle) First Name Surname

Address.....

.....

..... Postcode

Tel. No. Daytime..... Evening.....

Email

Please tell us the child's diagnosis and/or give the main cause of the difficulties to your child and/or family (please attach separate sheet if required):

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Please tell us how you think we can specifically help your child and/or family at this time:

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If you are a professional applying on behalf of a family, please give the following details:

Name..... Job Title

Address.....

..... Postcode

Tel. No. Email.....

Has the family given permission for this application. Yes No

Have you enclosed a letter from a professional confirming:

Diagnosis of the child Items required are specific to child's needs

Full specification of equipment requested Cost inc. VAT and delivery costs

That no other funds are available

BDF Newlife child and family grant Data Protection Statement

BDF Newlife is registered as a Data Controller with the Information Commissioner and is committed to ensuring that all personal information held is treated properly and in accordance with the Data Protection Act 1998 (The Act). The following paragraphs set out our policy regarding the personal information we collect about you and other family members (collectively referred to as 'you' and 'your'), in respect of your application for a BDF Newlife Child and Family Grant.

We need to assess whether we are able to offer you help and therefore, may need to collect the following information either on the application form or via telephone or email:

- You and your child's names, age, address and home telephone numbers.
- Details of your child's disability and details of any associated conditions; specific details of how mobility, motor function, communication, level of understanding and behaviour are affected; whether your child experiences seizures. Details of any hospital attendance, current treatments and/or therapies.
- Details of how the disability affects you and your child and the level of support needed when carrying out day to day activities such as bathing, dressing, washing, clothing/bedding, feeding, toileting, keeping occupied, safety precautions, teaching independence skills, encouraging play, leisure activities and sleeping.
- General information regarding the effects of your child's condition on you and your family life.
- Details of the type of equipment you have requested and the reasons why.
- Details of assistance we have already provided.

Information obtained from third parties

To help us decide if you are eligible for assistance, we may also ask for further information relating to your child's disability and its effect on your family's life from professionals linked to your child's:

- Health care (eg GP, hospital consultant, paediatrician, physiotherapist, psychiatrist, psychologist and/or health visitor).
- Education (eg teacher, educational psychologist, nursery staff and/or support staff).
- Social care (eg social worker and/or occupational therapist).

The information we collect from you and from third parties is stored securely on a computer database and for a limited period in our manual archives. Details of how you can obtain a copy of information held by us about you and your child are available on request.

Disclosure of Information

If you receive equipment from us, we will pass information about you to the supplier so they can provide you with the goods.

Declaration

To be signed by parent/primary carer

I consent, on behalf of myself and my family, to the collection and use of my and my family's personal information, as set out in the BDF Newlife Data Protection Statement above and declare that:

- I am authorised to give consent on my family's behalf for the collection and use of the accurate personal information provided.

Name

Date

Signature.....

Conditions of Grant

- The items are to be held in perpetuity. They must not be sold, leased or disposed of in any way, without prior written permission, within 2 years of delivery.
- The maintenance, repair and insurance of the equipment remain under your own control.
- BDF Newlife accepts no liability to renew, replace or repair the equipment.
- Upon disposal of this equipment, if this results in a sale/income, we would appreciate a donation back to the Charity of any funds realised. However, we would recommend that if there is no saleable outlet for the equipment, it should be donated to an appropriate department or Social Services Department of the benefit of others.

I agree to abide by the conditions set out above.

Signature Date

How did you hear about us?

Post your completed application form to: BDF Newlife, Hemlock Way, Cannock, Staffordshire WS11 7GF



Mailing address:
BDF, BDF Centre,
Hemlock Way, Cannock,
Staffs WS11 7GF



Telephone:
01543 468888



Facsimile:
01543 468999



Email:
info@bdfnewlife.co.uk



Website:
www.bdfnewlife.co.uk



newlife
...because some babies are very, very special