

## APPLICATION FOR GRANT

All applicants will need to fill out and email or fax the following:

- Application Form
- IRS letter with proof of 501(c)(3) tax exempt status
- Copy of a written cost estimate for the needed procedures and/or treatment from your veterinarian or written cost of estimate for supplies or expenses

### Please submit all forms together to Inside Voice

Email: insidevoicewyo@yahoo.com Fax: 800-986-5061

Please note – no contributions are EVER given directly to individuals. Funds will be made payable to the nonprofit or to the veterinarian providing services

Funding resources are limited and typically capped at \$500 per grant, but Inside Voice looks at each application on an individual basis and makes every effort to use their limited funds in the most responsible way.

Inside Voice does not discriminate on the basis of age, sex, or race of the applicant, nor on the breed or age of the animal.

Inside Voice reserves the right to deny funding to anyone for any reason.

Please read the complete application agreement for details of the application process.

Inside Voice respects your privacy and promises confidentiality. The grant amount is strictly between the nonprofit requesting the grant, the veterinarian/clinic administering the procedure or treatment, (if applicable) and the executive staff of Inside Voice. By accepting a grant, you consent to allow Inside Voice to recognize (tag) your organization and to use a photo of the animal on social media and/or the website.

Inside Voice is a nonprofit committed to helping pets in dire need of medical care, senior pets needing end of life care, pets in need of rescue or re-homing and pets in shelters needing food or treatment.

*Inside Voice is a 501(c)(3) Corporation* 

GRANTS ARE MADE IN THE MEMORY OF ELVIS
~ A TINY DOG WITH A BIG ATTITUDE AND A FIERCE INSIDE VOICE ~



## Grant Request for Assistance by a Nonprofit

In order to receive funds from Inside Voice this application must be completed by an owner, officer or board member who represents the nonprofit seeking the funds. All applicants seeking grants from Inside Voice for funding must provide the following information.

# **NONPROFIT INFORMATION**

Name of Nonprofit		
Address		
City	State	Zip
Website		_Fed ID#
Phone Number(s)	F	
Name of the person completing this a	application	
Title/Position	Email	
What year was the nonprofit establish	hed?	
Is the staff of the nonprofit made up	of volunteers, paid employe	es or both?
How many in total?	Volunteers	Paid Staff
FEDERAL A	ND STATE INFO	RMATION
Does the nonprofit have 501(c)(3) st	atus as defined by the Inter	nal Revenue Code?
	Yes	No
Does the nonprofit file an annual Form	ກ 990 with the Internal Rev	enue Service?
	Yes	No
Are all required filings current?	Yes	No
Is the nonprofit registered with the S	ecretary of State in their sta	ite?
What state?	Yes	No
Are the annual filings current with the	e Secretary of State?	
	Yes	No

# RESCUE/SHELTER INFORMATION

Is the nonprofit	an animal shelter and	d/or an animal rescue organiz	zation?
		Yes	No
Approximately h	now many animals are	e currently in the shelter?	
		Dogs	Cats
Does the nonpro	ofit offer screened add	options and/or re-homing ser	vices?
		Yes	No
Does the nonpro	ofit accept animals tra	ansferred from other rescues	or shelters?
		Yes	No
			currently living in the shelter or
	In	the shelter Foster	red outside the shelter
Comments, spe	cial requests or anyth	ing else that you would like ι	ıs to consider?
·			
TR	EATING VET	ERINARIAN'S IN	FORMATION
This portion ma	y be completed by eit	ther the nonprofit or by the cl	linic and/or veterinarian.
Name of the Cli	nic		
Name of the tre	eating Veterinarian		
Address			
City		State	Zip
Phone	Fax	Email	
How long has th	ne nonprofit applicant	been a client of this Clinic/Ve	eterinarian?
Cost Estimate \$ (Please attach e	estimate)	Medical License a	#
•			
Notes			

# THIS GRANT REQUEST IS FOR (PLEASE SELECT ONLY ONE)

<b>Veterinarian Care</b> (surgery, treatment,	tests, dental, orthope	edic, spay/neuter, RX,	etc.)
Name of Animal	Breed		
Age Is the animal spayed/ne	utered? Yes-Spayed	Yes-Neutered	No
Is this a medical emergency?	Yes	No	
Is your nonprofit willing and able to pay a procedure, including any/all follow-up can			
	Yes	No	
Rescue or Re-Homing Costs (foster ca	re, gas, air, lodging, f	ood, kennels, supplie	s, etc.)
Is this an emergency situation?	Yes	No	
Is your nonprofit willing and able to pay animal which may not be covered by this		s related to the rescu	e of the
	Yes	No	
Basic Need Costs (food, beds, kennels/	crates, flea/tick treatr	ment, wormer, collars	/leashes, etc.;
Is this a basic needs emergency?	Yes	No	
Is your nonprofit willing and able to pay a covered by this grant?	for any additional item	ns needed, which may	not be
	Yes	No	
Estimate of the TOTAL amount needed fo	r the vet car, rescue/	rehoming costs or bas	sic needs.
		\$	
Amount requested today for vet care, res	scue/rehoming cost or	basic needs.	
		<i>t</i>	

The undersigned swears the application for this grant is true and accurate to the best of their knowledge. The applicant has the right to reject but not negotiate, the amount of the grant. By accepting the amount of the grant, the applicant agrees that the funds accepted will be used specifically for the treatment, procedure or care, rescue or basic needs that have been stated on the application. If the application is denied and no funds are awarded, the applicant acknowledges that any treatments or procedures performed are at their own expense, any rescue or basic needs costs will not be reimbursed.

Name of Nonprofit	
PRINT NAME	SIGNATURE
TITLE	DATE

BY SIGNING THIS APPLICATION, YOU ARE GIVING YOUR VETERINARIAN PERMISSION TO DISCUSS THE ANIMAL'S HEALTH NEEDS WITH US, SO THAT WE CAN MAKE THE BEST-INFORMED DECISION, IN OFFERING FINANCIAL AID.

### INSIDE VOICE USE

GRANT APPROVED	DENIED	GRANT EXPIRATION DATE		
A Grant was made in t	the amount of \$		Date	
Procedure/Treatment,	Rescue/Rehome or L	Basic Needs		
Founds woods noorble b				
runas made payable t	0			
Check #	_Credit Card	Date	Invoice #	
Approved by				
If application was den	ied, why?			
Notes/Comments				

# APPLICATION AGREEMENT ABOUT OUR FUNDING

### WHO WE COVER

Inside Voice will consider funding requests for domestic dogs or cats. We will NOT cover farm animals, animals owned by breeders, or animals used for research or commercial purposes.

### WHAT WE COVER

- Inside Voice provides need-based financial assistance for the benefit of dogs and cats where serious or emergency veterinary care is needed beyond routine procedures, including treatment, surgery, and medications. Inside Voice will not pay 100% of a bill for veterinary care, but will, in some cases pay off the balance of an account, as long as the nonprofit has already made a partial payment toward the care of the animal listed on this application.
- We will also consider requests for aid for pets that need rescued and/or re-homed and for pets that are being neglected or abused.
- We will also consider help in funding pets in shelters who are in need of basic care, such as food and supplies.

#### Inside Voice will use the following criteria to determine approval of grants.

- The financial need of the nonprofit.
- The opinion of the treating veterinarian.
- **When Inside Voice approves funding –** We will contact the representative of the nonprofit who is requesting the funds.
- **Grant Amount** All grants are need based, but are typically capped at \$500 per animal/applicant. Sometimes lesser or greater amounts will be granted, based on the animal's or applicant's needs.
- **Approval or Denial of Grants** When we receive your completed application, we will contact you regarding approval or denial of funding. Please note if funding is denied, we are truly sorry. Most denials of funding will be based on lack of funds. In any case, Inside Voice staff will not be able to discuss the reason for denial.
- **Prognosis** The animal's prognosis must include a survival rate of 50% or better (as determined by the treating veterinarian) for the applicant to be eligible to receive a grant.
- **Results** While the application process is in part based on the subjective judgment of veterinarians and our staff, we feel these basic guidelines are clear, unbiased and necessary, and we will make the most ethical decisions possible with the information we have in each circumstance. **The animal's best interest is ALWAYS our priority.**

### WHAT WE DO NOT FUND

- **Any bills already paid or procedures already in progress** Inside Voice cannot reimburse anyone for veterinary expenses that may have already been paid.
- **Any animals owned by breeders –** None, under any circumstances.
- **Declawing, ear cropping or debarking surgeries** Inside Voice strongly discourages these practices and will **NEVER** fund these procedures under **ANY** circumstances.

#### **OUR COMMITMENT**

**Inside Voice is committed to helping as many pets as quickly as possible.** We will respond to your request as soon as we can and requests are answered on a first come, first served basis, typically within 12-24 hours for emergencies and within 36-72 hours for non-emergencies.