



GRANT APPLICATION FOR VETERINARY ASSISTANCE

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

- **Application Form**
- **Proof of income** – This can be a copy of a check stub, unemployment benefits letter, disability benefits letter etc. The proof of income must be recent (not over 30 days). Please do not send bank statements, tax returns or tax documents.
- **Copy of a written cost estimate for the needed procedure(s) and/or treatment from your veterinarian.**

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.

Inside Voice ONLY sends funds directly to the treating veterinarians and ONLY if your application is approved and treatment is scheduled. Funding resources are limited and typically capped at \$500, but Inside Voice looks at each application on an individual basis and makes every effort to use their funds in the most responsible way.

Once a grant is approved the treatment/procedure must be completed within 30 days or the funds will be forfeited, and application will be considered closed.

Inside Voice does not discriminate based on the 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 information provided is strictly between the person requesting the grant, the veterinarian/clinic administering the procedure or treatment, and the executive staff of Inside Voice.

Inside Voice is a nonprofit organization committed to helping pets in need of emergency vet care, surgical procedures, chronic care, treatment, RX and senior pets needing end of life comfort care.

Inside Voice is a 501(c)(3) organization

ALL GRANTS ARE MADE IN THE MEMORY OF ELVIS



To receive funds from Inside Voice this application must be completed (answer ALL questions) by the person(s) seeking the funds. If the pet owner is under the age of 18, the parent/legal guardian must supply proof of income, co-sign and consent to treatment of the pet.

APPLICANT AND PET INFORMATION

Name(s) of Applicant _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Pet's Name _____ Breed _____ Age _____

How long has the pet been in your family? _____

Is the pet? **Male** _____ **Neutered** _____ **Female** _____ **Spayed** _____

How did he or she become a part of your family?

Rescued _____ **Adopted from Shelter** _____ **Raised** _____ **Pet Store** _____ **Breeder** _____ **Other** _____

Is the pet current on Rabies vaccinations? **Yes** _____ **No** _____ Core Vax (DHPP)? **Yes** _____ **No** _____

If no, which are not current? _____

Medical History: date(s), clinic, past surgery's, illness, injury etc. _____

This grant request is for: (surgery, treatment, dental, RX) _____

Is this an emergency? **Yes** _____ **No** _____ Do you have Pet Insurance? **Yes** _____ **No** _____

Have you applied for Care Credit? **Yes** _____ **No** _____ **Approved Amt \$** _____ **Denied** _____

Do you have other pets? **Yes** _____ **No** _____

Dogs _____ Ages(s) _____ Cats _____ Age(s) _____

Estimate the total amount needed for care and/or procedure. \$ _____

Amount requested today for the care and/or procedure. \$ _____

Are you willing to pay for any remaining balance due for the treatment, procedure or RX, including all follow-up care, which may not be covered by this grant? **Yes** _____ **No** _____

EMPLOYMENT INFORMATION

Are you currently employed? (attach proof: pay stub, benefits/disability letter) Yes _____ No _____

Where? _____ How long? _____

If you are not currently employed, how long have you been unemployed? _____

Are you retired? Yes _____ No _____ Are you disabled? Yes _____ No _____

HOUSING AND HOUSEHOLD INFORMATION

Do you own or rent your home, or do you get federal housing benefits, such as Section 8?

Own _____ Rent _____ Section 8 _____ Other _____ Monthly Payment \$ _____

Do you receive any social services? None _____ Daycare _____ SNAP _____ Other _____

How many other adults (over the age of 18) live in the household? _____

What is the applicant's relationship to each of the adults?

Spouse _____ Significant Other _____ Roommate/Friend _____ Adult Child(ren) _____

Parent/Grandparent _____ Other _____

How many of the adults living in the household with the applicant are currently employed? _____

Not Applicable _____

How many of the adults mentioned above and living in the household contribute to the monthly expenses of the household? _____ Not Applicable _____

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 grant, the applicant agrees to the terms of this application and will promptly schedule the treatment or procedure prescribed by the veterinarian. If the application is denied and no funds are awarded, the applicant acknowledges that any treatments or procedures performed are at their own expense and the applicant will not subrogate against Inside Voice for the same.

PRINT NAME

SIGNATURE

DATE

Anything else that you would like us to know about your pet or their current medical need(s)? _____

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

TREATING VETERINARIAN'S INFORMATION

This portion of the application may be completed by either the Applicant or by the Clinic and/or Veterinarian.

Please note that once the application is approved the procedure or treatment must be completed within 30 days from the approval date or the grant will expire.

Name of the Clinic _____

Name of the treating Veterinarian _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

How long has applicant been a client of this Clinic/Veterinarian? _____

Cost Estimate \$ _____ Medical License # _____
(Please attach estimate)

Notes _____

**Please return completed application along with proof of income and vet estimate to:
insidevoicewyo@yahoo.com or fax to 800-986-5061**

INSIDE VOICE USE

GRANT APPROVED _____ DENIED _____ GRANT EXPIRATION DATE _____

A Grant was made in the amount of \$ _____ Date _____

Procedure/Treatment _____

If RX: med, monthly amount, terms _____

Funds made payable to _____

Paid by Check # _____ Credit Card _____ Date _____ Invoice # _____

Approved by _____ If denied, why? _____

Notes _____

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 of any kind. If applicants to Inside Voice are discovered to be using dogs or cats (or any animals) for illegal fighting purposes, we will provide the information to law enforcement agencies and assist in whatever way we can in the prosecution of these illegal and despicable activities.

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. We also consider requests for necessary medical care, including serious chronic health problems and end-of-life comfort care. We will consider requests for pets that need rescued and/or re-homed due to being neglected or abused.

Inside Voice will use the following criteria to determine whether funds will be disbursed for the pet's care.

- **THE FINANCIAL NEED OF THE PET OWNER** – We recognize that part of being a responsible pet owner means making the pet a part of your family and prioritizing their needs. We know that situations arise that are outside the scope of normal veterinary care and that those unexpected expenses can cause financial hardship. Our grants are offered for this type of need.
- **THE OPINION OF THE TREATING VETERINARIAN** – We will act on the recommendation of the veterinarian as to the medical necessity, urgency, and prognosis for the treatment needed.
- **THE DEMONSTRATED CAPABILITY OF THE PET OWNER TO TAKE RESPONSIBILITY FOR THE PET** – After consulting with the veterinarian to determine the immediacy of care, and after the pet owner's level of responsibility for the pet's future care, Inside Voice will determine the amount of funding to be provided. If funds are not immediately available, requests for grants will be put on a wait list for available funding. No amounts will be guaranteed while the pet is on the wait list and/or if the application has not been completed or the grant approved.
- **WHEN INSIDE VOICE APPROVES FUNDING** – We will contact the applicant and notify them of the grant amount approved. If he/she accepts the grant, then we will notify the veterinarian that funds have been approved. Inside Voice will disburse the approved funds directly to the veterinarian or their clinic on the day of the procedure, once the pet has checked in. If the grant is more than the total bill, the applicant agrees that the overage amount will be refunded to Inside Voice and not held as a credit on applicant's account.
- **RESCUED ANIMALS BY INDIVIDUALS** – Rescue dogs or cats covered by Inside Voice must be considered permanent adoptions and adoptions must have been made 3 months (or more) prior and the applicant must intend to keep the animal as a family member. We do not offer grants for feral or stray animals.
- **URGENT CARE** – Inside Voice will accept applications for emergencies and immediate care needs if the applicant qualifies. (Example: emergency surgery or treatment for a sudden illness. The application must be received within 48 hours of the pet being seen or treated for the emergency and we will try our best to expedite the application before the emergency or immediate care procedures are completed. Veterinarians with emergency applicant recommendations will be prioritized.
- **APPLICANTS MUST PROVIDE CARE PROMPTLY** – Your pet's medical needs cannot have been neglected past all reasonable time for treatment. For example, if your pet needed urgent care months ago but you were unwilling or unable to fund or provide the treatment, which is now causing the situation to be extremely critical and making it an emergency, we cannot grant funds for a neglectful cause. Applicants are responsible for making necessary arrangements for getting

their pets treated within a reasonable time frame. Sometimes this involves making very difficult decisions, but the **best interests of the pet will be our only consideration.**

- **PREVENTATIVE CARE** – Applicants whose pets are ill due to neglected preventative care will not be considered for funding. For example, if a dog has heartworm disease because the pet owner neglected to provide preventative care, the applicant will not be eligible. However, if the applicant adopted a dog not knowing the animal already had heartworm, the applicant would be eligible for consideration.
- **DENTAL CARE** – Requests for financial aid for dental care will be reviewed on a case-by-case basis and may or may not be eligible for grants. If dental treatment is necessary due to an injury to the pet or an illness, it would be an eligible for a grant. If a rescued or adopted pet has been in the home for less than six months and needs dental care, it also would be eligible. Most dental funding is reserved for seniors living on fixed incomes.
- **PROGNOSIS** – If treatment is likely to cause the pet suffering with little hope of a good long-term prognosis or quality of life, we will not approved funding for the care or procedure. The pet's prognosis must include a survival rate of 50% or better for survival beyond 6 months (as determined by the treating veterinarian) for the applicant to be eligible to receive the grant.
- **EUTHANASIA AND CREMATION** – If funding has been approved for a procedure, but during the procedure complications or circumstances have led to this difficult decision and euthanasia is recommended by the veterinarian, the original grant will not be disbursed. A grant for \$100 towards the cost of the euthanasia will be awarded instead. Cremation costs are not covered under a grant.
- **RELIEF GRANTS** – For ongoing and chronic pet health issues, such as diabetes, seizures, or thyroid disease, where lifetime treatment is necessary to keep the pet alive and healthy, with good quality of life, applicants must be able and willing to provide the care on an ongoing basis to qualify for the grant. Inside Voice will consider funding for such RX medication and food as prescribed by your veterinarian. For prescription meds and food, the grant may be issued in thirty-, sixty-or ninety-day periods, with 6 months being the maximum eligibility.
- **SENIOR PETS** – Inside Voice has a soft spot for senior pets and will not discriminate based on age. If we can assist by granting comfort care in end-of-life situations, we will. For example, if your senior pet has cancer and treatment could prolong its life, but not cure or save it, we will accept your application based on the opinion of the veterinarian that the pet would still have quality of life, for the rest of its life, however long that may be.
- **GRANT AMOUNT** – All grants are need based, but the typical capped amount for the grant is currently \$500 per pet/applicant. Sometimes lesser or greater amounts will be granted, based on the pet's and pet owner's needs. Inside Voice does not offer funding for 100% of the bill.
(Example 1: procedure is \$500, Inside Voice funds \$200, the applicant must be able to fund \$300.)
(Example 2: procedure is \$1000, Inside Voice funds \$500, the applicant must be able to fund \$500)
(Example 3: procedure is \$2000, Inside Voice funds \$800, the applicant must be able to fund \$1200)
- **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 the prognosis of pet, medical necessity of the treatment or procedure, income of applicant, minimal amount of an estimate, or the lack of funds.
- **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. **Your pet's best interest is ALWAYS our priority.**

PERSONAL REQUIREMENTS FOR APPLICANTS

- **YOU MUST BE ABLE TO PROVIDE BASIC CARE FOR YOUR PETS** – This includes not only food and permanent shelter, but also basic vet care when needed. Applicants who cannot provide basic care for their pets on an ongoing basis are encouraged to seek out appropriate adoptive homes for the pets that they cannot afford to care for.

- **YOU MUST HAVE A SOURCE OF INCOME** – You must provide proof of your source of income. Eligible sources include a recent pay stub (within 30 days), Unemployment Insurance or Workers Comp Benefits statements, Medicare or Disability Benefits letters or Pension letters. We cannot accept bank statements or tax returns. Parents/legal guardians must provide proof of income for applicants under the age of 18.
- **PET OWNER RESPONSIBILITY** – Your treating veterinarian will be asked about your demonstrated responsibility in caring for your pet. Since one of the greatest benefits of Inside Voice is keeping dogs and cats in the home and out of shelters, giving funds to irresponsible owners would not accomplish this goal.
- **CHANGING VETERINARIANS AFTER APPROVAL OF FUNDING** – If a grant has been approved based off the estimate of the current veterinarian and you decide to change clinics or doctors you must submit a new estimate (on letterhead). Depending on the amount of the new estimate, the amount approved for funding may change. (Example: estimate #1 was for \$1000 and grant approval was \$500 and then estimate #2 was for \$700, the amount of the grant may be reduced accordingly.) Grants expire 30 days after the approval date.

WHAT WE DO NOT FUND

- **INITIAL VET VISITS AND DIAGNOSTICS** – Once your pet has been seen, a diagnosis has been made and a treatment plan or a surgery/procedure is recommended, that is when Inside Voice will consider the application. We do not cover expenses for the initial visit, labs/blood panels, X-rays, CT scans, ultrasounds, biopsies or other diagnostic measures.
- **BASIC CARE** – Including but not limited to grooming, tick and flea treatments, worming, annual vaccinations, food, pet supplies or routine veterinary care. Inside Voice is committed to benefit those in need and those who are in serious situations where medical treatment is needed beyond routine care.
- **SPAYING AND NEUTERING** – Typically spay and neuter surgeries are not covered. Inside Voice believes that spaying and neutering your pet(s) is a necessity and is an important part of being a responsible pet owner, therefore we will not consider such requests. **EXCEPTION** – if the pet owner agrees to spaying/neutering the pet at the time of an approved procedure, additional funds may be granted, if the veterinarian determines it's feasible to do so during the procedure.
- **ANY BILLS ALREADY PAID OR PROCEDURES ALREADY IN PROGRESS** – Inside Voice cannot reimburse anyone for veterinary expenses for scheduled or emergent procedures that may have already been paid. If the account has a zero balance, we will not put funds on the pet owner's account with the intention of refunding the pet owner or responsible party. Even if you have not yet paid your bill, if the procedure or treatment has already been performed and the pet has discharged before the application has been received or approved for funding, we will not be able to fund the procedure. **EXCEPTION** – In life-or-death emergency situations or sudden and unexpected illness where veterinary care is an emergency and/or life saving measures must be taken immediately, the application may be submitted within **48 hours** of the treatment or procedure. The pet must have at least a 50% plus chance of recovery, survival and quality of life, for the grant to be considered.
- **ANY ANIMALS OWNED BY BREEDERS** – None, under **any circumstances**, will be considered for a grant.
- **DECLAWING, EAR CROPPING OR DEBARKING SURGERIES** – We will **NEVER** fund these cruel and inhumane procedures.

WE BELIEVE

- **EACH PET OWNER IS RESPONSIBLE FOR PROVIDING MEDICAL CARE OF THEIR ANIMALS.** Our goal is to support the special circumstances where extra help is needed and we are looking to help **responsible pet owners** who are prepared to accept this responsibility, both in attitude and in actions.

OUR COMMITMENT

- **INSIDE VOICE IS COMMITTED TO HELPING AS MANY PETS AS QUICKLY AS POSSIBLE.** Once your completed application is submitted, including proof of income and the vet estimate, we will respond promptly. Emergencies are prioritized and requests are typically answered within 12-24 hours for emergencies and within 36-72 hours for non-emergencies. All application requests are answered, so if you don't see a reply from us, please check your spam folder or reach out again.