

# Mental Health Grant Application

## Name of Applicant

First Name      Last Name

## Email

example@example.com

## Phone Number

Area Code      Phone Number

# Therapist's Information

## Name

First Name      Last Name

## License Number

## Phone Number

## Email

example@example.com

Area Code

Phone Number

## Program intent of the Mental Health Grant

The intent of the Mental Health Grant is to be able to subsidize up to 10 therapy sessions of those accepted into the program, at different rates. At this time we only have enough funding to subsidize the first two sessions of each person accepted into the program. Funding for subsequent sessions would depend on funding. Funds would be distributed directly to the therapist that the grantee selects. The grantee would be responsible for paying the rest of the cost for the therapy session. At no point would your enrollment in the program be published. The intent of the disbursement would be as follows:

Session 1: \$25  
Session 2: \$25  
Session 3: \$25  
Session 4: \$25  
Session 5: \$25  
Session 6: \$50  
Session 7: \$50  
Session 8: \$50  
Session 9: \$75  
Session 10: \$75

Again we are prepared (immediately) to cover the first two sessions at the rate shown above.