## American Council of the Blind of Indiana Opportunity Grant Fund

Each year the fund has \$1,000.00 available, in part or in whole, to aid any certified legally blind resident of Indiana. The grant would partially or fully fund such activity, materials, and/or equipment as may enhance the personal, educational, entrepreneurial or vocational aims of one who may be unable to obtain funding through other means.

A secondary purpose of the fund is to advise applicants of such other known means as may be available to meet their need.

Anyone interested in applying may do so by printing the application and mailing it to

Opportunity Grant Chair, 9110 Electric Ct., Indianapolis, IN 46260 Or, you may submit your application through this website.

Applications should be submitted at least ninety (90) days prior to the need. This will give the committee time to review and respond to the request.

The Hofstetter Opportunity Grant Fund is a project of The American Council of the Blind of Indiana (ACBI), an affiliate of The American Council of the Blind (ACB).

ACBI invites anyone or any organization to contribute to The Hofstetter Opportunity Grant Fund. Since no administrative or fund raising expenses are taken from the fund, whatever is contributed goes entirely to carefully Selected recipients.

For additional information write or call the chairman of the Hofstetter Opportunity Grant Fund:

3/19/18

Print

## Hofstetter Opportunity Grant Application

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Name:	
Address 1: Address 2:	
City:	
Zip code:	
Telephone number: Home	Cell
E-mail address:	
Date of birth:	

## PRODUCT, DEVICE OR TECHNOLOGY REQUESTED:

State why this product, device or technology is needed. Include the company or organization's contact information the product is being requested from.

Why should you be considered for a grant?

<u>List all other sources you have asked to assist in the purchase of the requested product, device or technology:</u>

Include a letter of verification of legal blindness from a professional in the vision field (ophthalmologist, optometrist, Vocational Rehab counselor, rehabilitation teacher, etc.). Mail to the grant chair at the address above.

## Submit