

Working together to
achieve better outcomes for
children with liver disease

Family Grant

Application

Date of Application:

Family name:

Child's name:

Contact parent name:

Phone:

Email:

Home address:

Hospital where admitted:

Start date of hospital admission:

Explain how a grant from Liver Kids Australia Inc would help you: (please attach an additional page if there is not enough space)

Submitting Your Application

Attach the letter of support from your hospital social worker to this application form and forward both to Liver Kids Australia by email or post.

Email: admin@liverkids.org.au

Post: PO Box 3519, WESTON ACT 2611

Terms and Conditions of Family Grants

- To be eligible to apply for a grant, families will:
 - Be Australian Residents.
 - Have a child who has been diagnosed with liver disease.
 - Have been on a uninterrupted hospital admission in an Australian hospital for a minimum of one (1) month.
 - Provide a letter of support from the hospital social worker that provides dates of admission in support of 'b' above.
 - Be members of Liver Kids Australia Inc.
- While applications can be made at any time, only a limited number of grants will be available in any one year. Applicants will be informed as soon as possible regarding the status of their application.
- Where there are more applicants for a grant than available funds, preference will be given to families who live more than sixty (60) kilometres from the hospital where their child has been admitted.
- Any family is only eligible for one (1) grant from Liver Kids Australia Inc.
- All grants are at the discretion of the Committee of Liver Kids Australia Inc. The decision of the Committee in relation to the allocation of grants is final.