**Guidance notes**

Starburst Charity is a small registered charity aiming to assist local children with special needs. We fund specialist items and equipment (e.g. adapted tricycles, mobile hoists, specialist buggies, sensory equipment, communication aids/apps etc) to enable them to have a better quality of life, join in activities with family and friends, build self-esteem, improve confidence or assist with independence.

**Who can apply?**

Applications can be made on behalf of individual children, or by non-profit making groups and organisations (working with children up to, and including, the physical age of 18 years) e.g. schools, colleges and registered charities etc. The child must live (or organisation must be based) in our catchment area covering the ***border*** area of Surrey/Hampshire/Berkshire. Email [charity@starburstfoundation.com](mailto:charity@starburstfoundation.com) to ask about eligibility.

**What can I apply for?**

We will consider requests for funding of specific items which will be of clear and direct benefit to the child/children. *Applications for the following will NOT be considered (list not exhaustive):*

|  |  |
| --- | --- |
| * Requests for monetary donations * repayment of loans * garden adaptations * administrative/salary costs * maintenance, insurance or on-going costs * distribution to other organisations | * reimbursement of funds already paid out * hire, rental costs or down payments * trips abroad or holiday costs * medical treatment, therapy (including Physio) or research * education/tuition fees |

**How do I apply?**

Applications can be made by parents, or representative of an organisation/registered charities using the Application Form below. Applications cannot be considered without at least one suppliers’ quotation for the item requiring funding. Please complete the form electronically and email it along with any supporting documents to [charity@starburstfoundation.com](mailto:charity@starburstfoundation.com)

**What happens then?**

Your application will be reviewed and considered by the Applications Team. A member of the Applications Team will contact you to arrange a visit to meet you/the child and seek any additional supporting information (e.g. recommendations from the child’s medical specialists e.g. occupational therapist). A decision will be made by the Applications Team following the visit and notification of the outcome will usually be by email. If your application is successful, payments are made direct to the supplier by Starburst Charity on receipt of invoices and we will arrange delivery of the item to your address. Starburst Charity is not responsible for arranging any maintenance or insurance of any equipment. We may seek permission to use photos and/or video footage of the child/ organisation and seek testimonials stories for promotional purposes (see consent form below at section 6).

**Data Protection**

On completion of this Application form it will contain personal information about yourself and/or the beneficiary. Starburst Charity take your privacy very seriously and will only use your personal data for administration functions within our company. This will allow us to process applications or inform our marketing strategy. Please complete the data protection statement at section 7 of the form.

**Re-application**

Further applications for a child who has already received an item from Starburst will not be considered unless 24 months have passed since delivery of the previous item.

1. **Your details (parent/carer/organisation)**

|  |  |
| --- | --- |
| **Your name:** |  |
| **Your address:** | **Post code:** |
| **Your telephone number:** |  |
| **Your email address:** |  |
| **Your relationship to Beneficiary:** |  |

1. **Who will benefit from the item? (child/organisation)**

|  |  |
| --- | --- |
| **Beneficiary’s Name:** |  |
| **Beneficiary’s School/College:** |  |
| **D.O.B and Age of Beneficiary:** |  |
| **Address of Beneficiary:**  (If different from above) | Post code: |
| **Please provide a brief description of special needs or health condition**  (attach any supporting documentation) |  |

1. **What are you applying for?**

|  |  |  |
| --- | --- | --- |
| **Please provide details of funding required:**  (include details of any quotes and attach to this application) |  | |
| **Is the donation time**  **dependant?**  (If yes, please specify the date funding is required by and why) |  | |
| **How will the donation**  **benefit the beneficiary?** |  | |
| **How often is the item likely to be used?**  (e.g. daily, weekly, monthly, annually?) |  | |
| **How long do you expect the child/organisation to benefit from the item**  (e.g. 1-2 years, 3-5 years etc) |  | |
| **Have you applied to Starburst in the past?** If yes, what did you apply for, for whom, and when? Please include details of all applications whether successful or not. | Note: we do not accept re-applications unless 24 months have passed since receipt of the previous item | |
| **Have any other**  **organisations been**  **approached for funding for this particular item?**  (If so, please give full details of who and for how much and if successful) |  | |
| **How did you hear about Starburst?** |  | |
| **If the application is successful, would you be willing to allow us to use photos and/or video footage of the child/organisation, and seek testimonials stories for promotional purposes?**  (The success of the application is not dependent on your answer) | | **YES/NO**  (if yes, please complete the photo release form overleaf which will only be used if the application is successful) |

1. **Our visit**

When is the best time for us to arrange a visit to meet with you and the beneficiary? e.g. daytime Mon – Fri only? Evenings and weekends? Etc.

|  |
| --- |
|  |

1. **Additional information**

Is there any additional information which might support your application? If so, please give details:

|  |
| --- |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Application** |  | **Signature** |  |

**6. Photo Release Consent**

If the application is successful, I am happy for Starburst Foundation to use my child’s image and/or video footage of my child, and accompanying story/testimonial, for marketing and promotional purposes.

This will include posts on the Starburst Foundation website (www.starburstfoundation.com), marketing banners, show programmes, traditional media (e.g. press releases) and social media such as Facebook, twitter etc. (this list is not exhaustive).

|  |  |
| --- | --- |
| **Name of Child** |  |
| **Date of birth** |  |
| **Address** |  |
| **Name of Parent/Carer** |  |
| **Signed** |  |
| **Date** |  |

1. **Data Protection Statement**

We would like to keep your contact details so that we can inform you of our upcoming events and productions e.g. the ‘invite only’ Charity Gala Pantomime Performance. If you consent to us contacting you for this purpose please tick YES, and your preferred method of communication below:

|  |  |
| --- | --- |
|  | YES - I agree for my details to be kept securely within Starburst Foundation[[1]](#footnote-1) |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Email |  | Text |  | Phone |

If you don’t wish us to contact you in the future, please tick NO below and we will remove you from our database once the review of your application is complete.

|  |  |
| --- | --- |
|  | NO – please remove my details from your database |

***Please now email this application to charity@starburstfoundation.com***

1. Our Privacy policy is on our website[www.starburstfoundation.com](http://www.starburstfoundation.com) should you wish to view how we handle your data.

   We will not share your information with any third parties. [↑](#footnote-ref-1)