

## FAMILY SCHOLARSHIP FUND APPLICATION

Family Scholarship Fund Policy is attached

Please complete the requested information and sign below. You must attach a copy of the previous year's income tax return in order to have your application considered for these funds. Any information you provide is confidential and will be kept in a secure file. If you have any questions please call the UW Autism Center Billing Office at (206) 616-2754.

Total annual household income:		
Total number of family members:		
Signature of parent/guardian:		
TI		
Relationship to child:		
Child's full name:		
Address:		
Phone:		
Date of application:	Application must be dated. Thank you.	_
Box	Autism Center 357921 CHDD CD-205 attle, WA 98195-7921	
Office use only Tax Re	eturn Received	
Approved for sliding fee scale at:	% Family pay:	%
Approved by:	Denied by:	
Date approved:	Date denied:	
Reason:		

# **FAMILY SCHOLARSHIP FUND POLICY**

The Family Scholarship Fund (FSF) applies to qualifying families receiving services from the UW Autism Center.

### **Services Covered by FSF**

FSF assistance applies to the following services within the UW Autism Center: diagnostic evaluations, occupational therapy evaluations & therapy, speech and language evaluations & therapy, social skills group sessions, behavioral consults, school consultations, home visits, early intervention treatment, program writing and training charges. The FSF may also be applied to the required deposit for diagnostic evaluations. The FSF cannot be used to assist with charges for services provided by medical professionals affiliated with the UW Autism Center. The services by these providers are charged separately through Children's University Medical Group (CUMG).

### **Use of Funds**

All information regarding family income and circumstances will be kept confidential. Families whose income falls within the FSF parameters of the FSF may qualify for reduced fees for services on a first come, first serve basis. FSF is <u>not</u> retroactive; the use of funds may only be applied toward services provided after the date of approval.

The FSF program is always subject to available funds. The funding of this program is provided by reservation of a portion of the net income received during the previous year and through annual fundraising, and thus may fluctuate from year to year. Family Scholarship Funds will not be available after the annual allocation has been dispersed. The amount of funding available is determined at the beginning of each fiscal year and is based on the funds received for this purpose during the previous year.

### **Ongoing Process**

FSF recipients will be required to pay at time of service at each visit for non-covered services. For diagnostic evaluations FSF recipients may (if not paid in full) set up a payment plan that is required paid monthly. FSF recipients must comply with all UW Autism Center billing policies in order to maintain funding. If these policies are not adhered to, participation in the Family Scholarship Fund program will be forfeited. The UW Autism Center's Policy and Procedure for Collections is applicable to these accounts, and any decision of termination will be made by the director of the UW Autism Center.