

Humpty Dumpty Foundation

Funding Application Form



About Humpty

The Humpty Dumpty Foundation, a non-profit organisation, was founded in 1996 to purchase much needed medical equipment for the children of Royal North Shore Hospital. Since then, Humpty due to the overwhelming corporate and community assistance has been able to widen his support to Paediatric Departments across the state and also 2 children's hospitals in East Timor..

The Humpty Dumpty Foundation is a charity that actually makes a difference. It's a charity that helps the most vulnerable people in our community: the children.

Each year Humpty holds two major fund-raising events; The Balmoral Burn and the Humpty Dumpty Ball. Event dates for 2009 are as follows –

Balmoral Burn, Sunday 31 May – Fun run/ walk up Awaba Street, Balmoral
Humpty Dumpty Ball, Saturday 5 September - Four Seasons Hotel, Sydney

CLOSING DATES FOR FUNDING APPLICATION FORM: strictly 1 March and 1 July each year

Contact Details For further information contact - Humpty Dumpty Foundation Phone: (02) 9439 0511 Fax: (02) 9439 0410 Website: www.humpty.com.au	Completed application forms Completed application forms to be sent to - ATT: Claire Reaney Humpty Dumpty Foundation Talus Street ST LEONARDS NSW 2065 Email: claire.reaney@humpty.com.au
--	--

Humpty's Aims & Eligibility for equipment donation

Humpty is dedicated to providing essential & state of the art medical equipment as well as other fundraising support to Hospitals providing care to children throughout NSW and in East Timor.

Eligibility criteria for consideration for a donation are:

- 1] Service provided **only** for children. Includes items such as specific medical equipment and items to improve the healing environment in medical settings.
- 2] Other funding sources have been approached already without any success
- 3] Prepared to allow Humpty access to donated equipment & services for the purposes of public relations and media exposure

Proposals for co-funding with other local sources will also be favourably considered.

HOSPITAL DETAILS (all fields are mandatory)

Hospital Name

Address

Suburb.....State.....Pcode.....

Hospital CEO/General Manager.....

EmailPh.....

Key Public Relations/Fundraising contact

EmailPh.....

Area Health Region (eg NSCCAHS)

CEO.....Ph.....

Humpty Dumpty Foundation

Funding Application Form



Each new equipment request requires a new Funding Application Form to be completed - All fields are mandatory

HUMPTY DUMPTY HOSPITAL CONTACT:

This person is the first point of contact for the Humpty Dumpty Foundation regarding any questions surrounding a Funding Application Form or equipment. Humpty's contact is responsible for the complete follow through of all equipment requests across **ALL** hospital departments. This includes informing the Foundation of equipment deliveries and ensuring that all equipment donated by the Foundation is plaqued accordingly.

This person's contact details must be completed irrespective of the Requester's details.

Name.....Position.....

Postal address

Suburb.....State.....Pcode.....

Contact Number.....Fax.....

Email.....

Bio-Medical Contact.....Phone.....

REQUESTER

Name.....Date.....

Position.....Department.....

Phone.....Email.....

Equipment delivery address: - **MUST BE COMPLETE STREET ADDRESS** (no PO Boxes)

.....

Suburb.....State.....Pcode.....

Contact details for delivery: Name:..... Phone:

DETAILS OF EQUIPMENT/FUNDING REQUESTED

Name of department this item is intended for:

Name of equipment:No Req

Purchase price (Current Quote must be attached): \$.....per unit **INCLUDING GST**

NB: Quote must be less than 2 months old

Vendor:

Contact details of vendor: Representative name:.....

Phone Numbers: Office: Mobile:

Email:

Description in lay terms of the equipment/funding request & intended use: (*Attachment if necessary*)

.....

Humpty Dumpty Foundation

Funding Application Form



Description cont.....

.....

.....

Details of equipment/funding requested

Explain how donation of this equipment/funding fits with the HDF objective of improving paediatric services in NSW (150 words maximum)

.....

.....

.....

Sharing stories...

Humpty is interested in sharing stories with his supporters on how this equipment will help or how it has helped the hospital or particular individuals in their quest for wellness. We encourage you to share your stories (*Attachment if necessary*)

.....

.....

.....

Attachments required:

- Current** quote from vendor detailing item of equipment and price
- Image of the product (in jpg or tif format) for HDF promotion **must** be emailed to janej.jenkins@humpty.com.au or copied to disc and sent to the HDF office

NOTE: the above items must be included in order for your request to be considered.

I certify the above details to be accurate and correct

Signature: Date:

Service Head/Hospital Representative Declaration

On behalf of the Hospital applying for this piece of equipment I state the following

- 1] I support the application for this donation of medical equipment
- 2] I confirm that this donation is necessary for exclusive use in Children's Services
- 3] The requested donation is consistent with the clinical policy of this Service
- 4] Biomedical engineering or the equivalent equipment maintenance service has approved this application
- 5] I understand that ongoing costs for this donation including training, insurance, warranty, maintenance & consumables are the responsibility of the Hospital receiving the donation
- 6] I understand that this donation, if approved, will be purchased by the Foundation and then donated to the Hospital (see flow chart)
- 7] I agree to the Humpty Dumpty Foundation using the Hospital or Service's name for promotional purposes
- 8] Other potential sources of funding, particularly the Area Health Service, have already been approached & have declined
- 9] **The Humpty Dumpty Foundation expects that items placed on our final Wish List for our donors to purchase will not appear simultaneously on any other wish list at the time of our events.** If the equipment is not purchased during the event you will be notified and be able to freely fundraise for the item. Please inform the Foundation immediately if this should occur

Department/Service Head name:.....

Signature: Date:

Humpty Dumpty Foundation

Funding Application Form



FLOW CHART OF DONATION PROCESS

