



WAYNE COUNTY COMMITTEE CARING FOR CHILDREN & ADULTS, INC.

Return Applications to:

PO Box 406 • 215 S. Walnut St. Wooster, OH 44691

Phone: (330) 264-5576 Fax: (330) 264-5607 www.uwwh.org/wcccca

Group or Non-Profit Application

Wayne County Committee Caring for Children & Adults (WCCCCA) works to enhance the wellbeing of individuals with disabilities or other complex medical needs through personalized medical equipment, innovative technologies, and targeted financial assistance. Applications for assistance are reviewed based on alignment with our mission, financial need, and availability of funds.

Completed applications and all required documentation or quotes must be received by United Way Wayne and Holmes (UWWH) by the **first Thursday of the month**. Organizations submitting a Group or Non-Profit application for assistance must be available to give a brief presentation on their request at a WCCCCA meeting. The presentation date will be scheduled based on the committee's agenda and availability. Committee meetings are typically held the second Tuesday of each month at 5:30pm (no meetings in July or December). A decision may not be made until after the organization presents to the Committee.

A separate **Individual Application or Home Modification Application** is available for community members requesting assistance, along with separate guidelines for each.

For questions or assistance with the application, please contact United Way Wayne and Holmes Counties at (330) 264-5576 or email info@uwwh.org

GROUP/NON-PROFIT APPLICATION GUIDELINES

- WCCCCA primarily covers: medical equipment, medical supplies, services for individuals with physical or medical disabilities.
- Group or Non-Profit applying for assistance must be located and/or serving community members in Wayne County, Ohio.
- Group or Non-Profit applying for assistance must be in good standing with the Ohio Attorney General and Ohio Secretary of State
- If WCCCCA approves your request, recipients of Group or Non-Profit applications will be required to complete a brief **Post-Award Report**, providing information for use on the committee's website, social media pages, printed publications, and others.
- Organizations requesting assistance cannot apply more than once in a 12-month period.
- Application must also include at least two quotes from two different suppliers/contractors if available.
- Refer to the **WCCCCA Preferred Vendors List** for recommended local contractors and providers.



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Group or Non-Profit Application

Name of Organization or Group: _____		
Contact Person: _____		
Address: _____	City: _____	Zip: _____
Phone Number: _____	Email: _____	
Is this group a non-profit 501 (c)(3): <input type="checkbox"/> Yes <input type="checkbox"/> No		EIN: _____

INFORMATION ABOUT REQUEST

What assistance do you need from the Committee? _____
Who will be helped by this project or activity? How many would this help? _____
When is the financial assistance needed by? _____
What is the total amount of financial assistance needed? _____
Has this organization previously applied for assistance from WCCCCA? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date of last request and assistance provided: _____

I, the representative of the above named organization, hereby release all information to the Wayne County Committee Caring for Children and Adults, authorize that it is true to the best of my knowledge, and give permission for the committee or their agency, United Way, to investigate the above information and discuss it among themselves and/or other agencies or programs that may have a concern or be of some assistance. **I understand that if the committee grants our request, we will be required to complete a brief Post-Award Report, providing information for use on the committee's website, social media pages, printed publications, and others. We agree to comply with their request.**

Organization Representative's Printed Name: _____

Organization Representative's Signature: _____ Date: _____

It is the policy of the Wayne County Committee Caring for Children and Adults, Inc., that no person shall be denied services on the basis of race, ethnicity, age, color, national origin, sexual orientation, physical or mental handicap, or developmental disability according to Title VI of the Civil Rights Act of 1964; or any person with "HIV" or Aids-related complex; or in any manner prohibited by the laws of the State of Ohio and the United States.

OFFICE USE ONLY	
Approval/Denial:	
Date of Meeting Decision Made:	