getConnected Programme

Application Form

OVERVIEW

The getConnected programme results from a pilot project carried out by the Society in early-mid 2007.

The aim of the programme is to allow members with cerebral palsy, especially those with limited verbal ability, access to the internet for email as well as the wealth of information and entertainment on the net. This ability will allow people to have an independent line of communication to the outside world as well as allowing the outside world a direct line to the individual.

For successful applicants the Society will fund the hardware required, ie PC, accessories and connection to the internet, as well as the initial setup fee for the Internet Service Provider. The Society will install and commission the equipment and provide starter training to the applicant. The equipment will remain the property of the Society for 12 months after installation, after which, providing the terms of the agreement entered into have been fulfilled, the equipment becomes the property and responsibility of the user.

The user will be required to fund the rental of the internet connection and internet usage. The ability of the user to be able to afford this element will be critical.

CRITERIA

The criteria for a person's application to be considered is as follows:

1. You must have cerebral palsy. The Society may request written proof that you have had a clinical diagnosis of cerebral palsy.
2. You are a current financial member of the Cerebral Palsy Society of NZ Inc, and have a membership number.
3. You must be able to afford the rental for an internet connection, preferably broadband.
4. You must have an existing telephone connection into your premises.

PROCEDURE

To apply to be part of the programme fill out the form to the right and post it to the Society.

There are four possible outcomes:

1. You are accepted pending an onsite evaluation of your circumstances and premises.
2. You fit the criteria but are put on a waiting list.
3. You are not accepted and invited to apply next financial year. (1st July through to 30th June)
4. You are not accepted because you do not fit the criteria.

In all cases you will be notified within a month.

A written agreement will be entered into by both parties outlining responsibilities and ownership.

Note: You must be a current financial member of the Society before applying for this programme, as well as having cerebral palsy

Name of Applicant:

_____

Cerebral Palsy Society Membership Card Number:

_____

Membership Card Expiry Date:

_____

I have cerebral palsy? Yes No

Please provide any information that may assist your application:_____

_____

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_____

Please explain why you are not currently on the internet: _____

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_____

If there is insufficient space above, please attach a seperate sheet with your answers to this application form.

Signature: _____

Date: _____

Send completed application form to: **Cerebral Palsy Society of NZ, PO Box24759, Royal Oak, Auckland 1345**
Ph: 0800 503-603 Fax: (09) 624 1802 Email: cpsociety@cpsociety.org.nz