PowerOn Individual Tech Grant

Surviving, let alone thriving, in today's society requires connection. A phone, tablet, or laptop is essential for completing schoolwork, applying for jobs, staying in touch with friends and family, and accessing vital online services like healthcare. While essential, these devices are often out of reach for many. PowerOn is dedicated to providing the LGBTQ+ community with the technology it needs to survive and thrive.

The PowerOn Individual Tech Grant provides life-saving and life-changing technology (cell phones, tablets, and laptops) to LGBTQ+ individuals for personal use.

ELIGIBILITY REQUIREMENTS

In order to qualify for this grant applicants must:

1. Identify as a member of the LGBTQ+ community (however applicant wishes to self identify)

2. Be a resident of the US (immigration status will not affect eligibility)

3. Be over the age of 16

4. Be referred through an establishment such as an LGBTQ+ center, social service organization, school, university, etc. Referrals can be made by case managers, organization staff, teachers, counselors, advisors, professors, etc. If you have questions regarding whether your entity qualifies to make referrals please reach out to our team here.

*Applicants may apply for one device within a 12 month period.

Applicant Information

Applicant information will be used to identify the applicant, as well as ensure proper shipping and delivery of the granted technology if application is accepted. Please include all details necessary, including a phone number and email address, that you have access to, where updates can be received.

Full Name (please use lived name) *

First Middle Last

First M. Last

First Last

PowerOn Individual Tech Grant

Email Address *

test@email.com

Phone Number

(123)4567890

(123)456-7890

1234567890

When completing the information regarding address, please include all information needed to deliver the granted technology (building number, street name, apt numbers, floor, city, state, territory, zip code, etc.) This information will be for internal use only.

If the applicant's main address is not able to or isn't the best option to receive the granted technology, there will be an option below to provide an alternate mailing address.

Street Address *

01 Example St.

01 Example St. #1

01 Example Ave. Apt. 1

01 Example Ave. Floor 1

City *

Test City

State or Territory *

Alabama

Zip Code *

10101

PowerOn Individual Tech Grant

For the following question, if the applicant's main address is also their mailing address, please select "yes" and continue to the next question.

Is the applicants address the same as the address the tech should be mailed to? *

◉ Yes

○ No

As mentioned above, if the applicant's address is not the best option as a mailing address, please select "no" in the following question and include a full address where we would be able to send the granted technology (including all the necessary information stated above) and the name it should be made out to. Some examples of alternate addresses could be from a family member, referral establishment, etc. If using an alternate address, someone must be present to sign for the delivery.

Is the applicants address the same as the address the tech should be mailed to? *

○ Yes

◉ No

What address should the tech be mailed to?
Please include the name it should be made out to *

John Doe, 01 Example St. Apt 1, Test City, AL, 10101

If applicant is chosen to receive this grant, what name should be used on the shipping?

First Last

Do you identify as a member of the LGBTQIA+ community? *

◉ Yes

○ No

Being part of the LGBTQIA+ Community is a requirement for this grant.*

What is your age? *

16

To be eligible for this grant, the applicant must be over the age of 16*

PowerOn Individual Tech Grant

The Individual Tech Grant awards one (1) piece of technology per person per year. In the following question, please select the device you are applying to receive. As well, all the following explanatory questions should refer to the use of the technology the applicant is applying for.

Which device are you applying to receive? *

○ Smartphone

○ Tablet

◉ Laptop

Please include as much information about your reason for applying. The more context you give us, the better we will be able to understand your reasoning and your needs. All information shared in this form is for internal use only. Please use full sentences and be as descriptive as possible. Some examples of your reasoning can include, but are not limited to:

Financial barriers, medical situations, previous tech was stolen/lost/broken/outdated, If you have never had the tech device before, needed for school/work, needed to access life-saving or life-changing resources, etc.

What is your reason for applying for this grant? Please explain in a few sentences. *

I am currently unemployed as of June of 2023 and have been facing financial struggles. I am trying to find a new job but that requires having a functioning laptop, which I cannot afford. The little money I had saved has allowed me to keep up with my current bills, but I don't have enough to buy a new computer. To be able to apply for jobs, I need a laptop to save and send my resume and application. The laptop will also allow me to join online interviews for these jobs.

I currently have an outdated/barely functioning cellphone. The battery doesn't last long before the phone dies and it also doesn't let me update the software anymore. It also no longer runs apps like my email, google meet, or WhatsApp because it is so old. I currently am living in a shelter and am working with a case manager. We communicate through phone, and I am scared that it will not work one day and I won't be able to contact them anymore.

Please include as much information about how you will use the device. The more context you give us, the better we will be able to understand your reasoning and your needs. All information shared in this form is for internal use only. Please use full sentences and be as descriptive as possible. Some examples can include, but are not limited to:

Education: What classes, tools, software do you need access to? Are you in a bootcamp or courses to further your education? Is it essential to your educational field?

PowerOn Individual Tech Grant

Career/Profession: Are you applying to jobs? Do you need to write a resume and cover letter? Do you need to use virtual meeting platforms? Are you changing careers and need to network? Does your job require technology that runs specific software or programs?

Life: Do you need to contact case managers, medical staff, or emergency services? Do you need to find housing or shelter? Do you need to find food banks?

How do you plan to use your device? Please explain in a few sentences *

> I would use the cellphone to contact mental health professionals. To be able to make or reschedule appointments, I need a phone to call the office to make arrangements. The office also sends text reminders of the appointments. In case of emergencies, I can also talk to my therapist on the phone if I cannot make the appointment in person. The cellphone will also help me have a main point of contact that is my own.

> I am a artist and plan to use the tablet as a medium for my art. I can download apps and programs that can help me create my art digitally, as well as save them on a device. I can also better manage my social media through the device to get my art out in the world. Most of my work are based of commissions that I get through my social media, so I am able to use the tablet to keep track of these.

Please include as much information about how this technology will impact your life. The more context you give us, the better we will be able to understand the importance of this technology to you. All information shared in this form is for internal use only. Please use full sentences and be as descriptive as possible. Some examples of the impact can include, but are not limited to:

How will life be easier for you? How will this help you reach your personal or professional goals? What is something you couldn't do before that you would be able to with the device? How would that impact you? What barriers would this technology help you overcome? What mental load will the technology help with?

If you are chosen to receive a device, what do you foresee the impact of having the device will be for you? Please explain in a few sentences. *

> If I receive this laptop, I will be able to keep up with my school work. I can use it to do homework at home, instead of staying late at school or having to go to a library. There have been projects that are very long and I cannot complete in one sitting. I can only stay at the library till 6pm, so if I don't finish before that time, I am not able to submit finished projects. This will let me do my work in part and save as I need, as well as continue after 6pm if necessary. This will help get my grades up at school.

PowerOn Individual Tech Grant

If you are chosen to receive a device, what do you foresee the impact of having the device will be for you? Please explain in a few sentences. *

I am currently living out of my car after being kicked out by my family for coming out. This device will help me find somewhere safe and stable to stay. I am stressed about where to go as winter gets closer. I hope that I with this technology I am able to apply to find a place to call my home and stay warm over winter. Also, since getting kicked out, I have felt very lonely and have found a community online. Having this device will help me keep communicating with them, as they are the only people I feel safe to be myself with.

How did you hear about PowerOn? *

Local LGBTQ+ Center

A friend

Internet search

If you are selected to receive a device, do you agree to participate in 3 and 6 month impact surveys regarding how you have used the technology and the impact it has made for you? *

☑ Yes

The applicant must complete 2 impact surveys as a requirement of receiving this grant*

Personal & Demographic Information

Please note that this information will not be used in any capacity during the grant decision-making process and is collected to understand PowerOn's community impact.

This information will not be used in the decision making process. PowerOn collects demographic information in order to better understand the program's reach in the community and areas for growth. Please respond with the identities that you feel best describe you or fill in your own. You may select or write in multiple options.

PowerOn Individual Tech Grant

<div style="background-color:#d0264b; color:white; padding:10px;">

Referral

</div>

In order to be considered for the Individual Tech Grant, you must be referred through an establishment such as an LGBTQ+ center, social service organization, school, university, etc. Referrals can be made by case managers, organization staff, teachers, counselors, advisors, professors, etc. **Individuals cannot refer themselves to receive a grant.**

The next question will determine how the referral will be made.

Are you physically present with the staff member submitting the referral? *

○ Yes
◉ No

If the applicant is not completing the application with their referral, please select "No" and the following section will show the following:

Please share the referral link below with the organization staff member referring you for the Individual Tech Grant. Once you have shared the link you can submit your application.

English Referral Form: https://fs22.formsite.com/QwPsEf/ie7rwma5ff/index

Formulario de Referencia en Español: https://fs22.formsite.com/QwPsEf/tgxgw1up1l/index

The applicant must share this form link with their referral for separate completion. Applicants **MUST** have a referral to be eligible for the grant. Once the applicant has sent the referral link, they can submit their application. **FOR REFERRER:** When completing the referral please include the full name of the applicant so we can match the appropriate referral and application.

Are you physically present with the staff member submitting the referral? *

◉ Yes
○ No

If the applicant IS completing the application with their referral, please select "Yes" and the following section will show the following:

Name of organization providing the referral *

Full Organization Name

PowerOn Individual Tech Grant

Website of organization providing the referral: *

test.com

For the next question, after selecting the type of organization you are, you will have a secondary follow up question.

The organization is: *

- ◉ PowerOn Partner Center
- ○ LGBTQ+ Center (not partnered with PowerOn)
- ○ Social Service Provider (non-LGBTQ+ specific)
- ○ Educational Institution
- ○ School Affiliated Group
- ○ Other

If you selected anything other than "Educational Institution" you will get this follow up question:

Please list the services that your organization provides *

List out what services your organization provides

If you selected "Educational Institution" you will get this follow up question:

Please specify the type of educational institution *

- ◉ High School
- ○ Undergraduate school
- ○ Graduate school
- ○ Trade school
- ○ Certification program
- ○ Continuing education
- ○ Bootcamp
- ○ Other

PowerOn Individual Tech Grant

Name of staff submitting referral *

> Full Name

Title of staff submitting referral *

> Director of X Program

> Case Manager

> School Counselor

For the Staff Email and Phone Number, please make sure it is an email address the referral checks regularly and a phone the referral has reliable access to. If we cannot contact the accepted grantee, we will be contacting the referral through this contact. If the email or phone number changes or there is a change in the person in charge of the referral, please let LGBT Tech know as soon as possible.

Staff email *

> example@organization.com

Staff phone number *

> (123)456-7890

If there is anything you think we should know about the referral, please use this space to explain and describe.

Does this person have any barriers or needs that are not identified in this form? Does this person have financial limitations that you are aware of? Can you speak to this person's personality, responsibility, passions or interests? Are they working on something interesting?

Is there anything else you would like us to know regarding this referral? *

> This person has gone through some very rough situations in the last year. I know that this grant will give them something positive to look at this year. Hopefully they can see this as a step in the right direction getting out of this rough patch.

PowerOn Individual Tech Grant

For the following question, referrals must select "Yes" for application to be accepted. A reminder that the grant compliance includes 2 impact surveys that the grant recipient must complete (3-month and 6-month). If the grantee is not able to be reached, the referrer will be contacted to reach out and collect the survey.

I understand that by submitting this referral I may be contacted to ensure grant compliance by the applicant should the applicant not follow through with grant compliance procedures. *

⦿ Yes

◯ No

After completing the question above, the applicant can submit their application.

All answers to the questions above are examples. All applications will be reviewed individually.

This grant operates on a monthly rolling basis. Applications are accepted at all times but will be reviewed monthly in the order they were received. Any qualifying applications not awarded a grant will be carried over to the next month's pool. 2023 applications will open September 22nd, 2023 and will close December 12th, 2023.

Please see FAQs at www.poweronlgbt.org/individual-grant.

Questions about this opportunity will be answered by email only. Please contact Samantha Sygier, Programs Coordinator, with any questions.