

## Eye-Link Minnesota Assistive Equipment Grant Application

Eye-Link Minnesota provides assistive equipment/technology grants to Minnesota residents experiencing uncorrectable loss of their sight. Eye-Link welcomes all applicants. The application can be filled out and submitted online at [Mn.Eye-Link.Org](http://Mn.Eye-Link.Org), or you can email a copy directly to our Director Applications Jef Thompson at [JThompson6835@icloud.com](mailto:JThompson6835@icloud.com).

The Eye-Link Board of Directors reviews and makes decisions on all grant applications on a date received basis. Approved grants may include either new or refurbished equipment. All Applicants will be notified of their application status within two business days following Board review.

1. Name \_\_\_\_\_

2. Home Address \_\_\_\_\_

3. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Home Phone \_\_\_\_\_ Cell or Work Phone \_\_\_\_\_

5. E-Mail address (if available) \_\_\_\_\_

6. Are you currently a client of any state agency like Mn Assistive, MCIL, or any low vision related facility? Yes \_\_\_\_\_ No \_\_\_\_\_

7. If yes, please provide the name of facility or counselor  
\_\_\_\_\_

Phone \_\_\_\_\_

8. How was your need for the equipment/training you are requesting determined?  
\_\_\_\_\_

9. What type, model or description of assistive equipment or technology are you requesting from Eye-Link?  
\_\_\_\_\_

The following is optional but would assist Eye-Link in making a prompt response to you:

I give Eye-Link Minnesota representatives permission to contact any current or former vision counselors on questions related to the specific equipment that I am requesting to have Eye-Link purchase for me.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Applications can be submitted either online or emailed directly to:  
[JThompson6835@ICloud.Com](mailto:JThompson6835@ICloud.Com)

For more information visit [Mn.eye-link.org](http://Mn.eye-link.org), or call Jeff Thompson at 612-554-2530 if you have questions or need assistance.

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