

Family Assistance Fund Application

The Little Miracles Trust administers donations to assist whānau facing hardship, working in partnership with neonatal intensive care and special care baby units to make informed decisions. We use the following list to guide decision-making, alongside information from the unit team:

- *Whānau impacted by severe financial hardship in more than one area (e.g. food, travel, loss of wages) AND/OR no other support in Aotearoa AND/OR home location*
- *Length of stay in the unit (longer lengths of stay may be given higher priority)*
- *Involvement of other agencies of support and care already required by the whānau (e.g. WINZ, National Travel Assistance, Oranga Tamariki)*
- *Complexity of baby's case*
- *Lack of support available within existing whānau network, or from other agencies*

In 2024 the New Zealand Lotteries Grant Board COGS scheme and Woolworths NZ are supporting the Little Miracles Trust hardship support initiative. Woolworths NZ gives millions each year to community groups, both in cash and value of food, focused on **Food for Good**. As part of that, Woolworths NZ is supporting the Little Miracles Trust by providing \$50,000 worth of gift cards to enable whānau to buy food and other necessities while their baby is in intensive care.

Please complete the form yourself, or with support from a social worker or Little Miracles Trust family support coordinator.

The Little Miracles Trust is committed to maintaining privacy in accordance with the Privacy Act 2020. See how we manage personal information here www.littlemiraclestrust.org.nz/privacy-policy. Our Hardship Support Policy can be found here www.littlemiraclestrust.org.nz/hardship-policy.

Please note that regional allocations will vary according to grants received across the year. It is our intention that the decision made by The Trust is communicated to all involved in a timely manner.

The Trust is committed to providing the best possible services to families. By applying, each whānau agrees they may be contacted to take part in a voluntary, anonymous, confidential feedback survey. Feedback received will be used to guide improvement to future services.

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Referral Details

Please write clearly in BLOCK LETTERS

If you are self-referring please skip this and complete the whānau details.

Your contact details (*person referring*):

Name _____

Email _____ Phone _____

Before proceeding, confirm you have obtained whānau permission to share their details with us:

Yes No

Whānau Details

Current NICU or SCBU _____ Mothers Name _____

Family Name _____ Baby Name (*or babies*) _____

Gestation _____ Date of Birth _____

Address (*incl. City, Suburb, Postcode*) _____

Email _____ Phone _____

Please provide as much information as possible regarding the reason for the whānau requiring hardship assistance:

Which hardship voucher is preferred (*please note cash is not given out*):

Grocery (*digital e-voucher*) Petrol AT Hop/Snapper/Bee Card

1 year subscription to St John Ambulance Other (*please specify*)

Further comments:

Please note, a representative of the Little Miracles Trust may call you to follow up or to get some feedback.

Thank you for completing this application. Once finished, please scan and send a copy to support@lmt.org.nz

We will be back in touch via email with a decision shortly.