

Good Vibes GAP Application

Good Vibrations Energy Center

The Good Vibes Grant Assistance Program (GAP) provides financial assistance to individuals seeking services at Good Vibrations Energy Center. Please complete all fields below. All information is kept strictly confidential.

Section 1 — Applicant Information

Applicant's First Name

Applicant's Last Name

Applicant's Mailing Address

City

State

Zip Code

Applicant's Home Phone Number

Applicant's Cell Phone Number

Applicant's Email Address

Section 2 — Health Concerns & Financial Need

Tell us what health concerns are bringing you to GVEC and why you believe you need financial assistance for our services.

Why do you believe we should fund your application? What impact will it have on your life?

Section 3 — Services Requested

What services are you requesting and for what time period or number of services? If you do not define an end-point for grant services, the GVEC Board will define one for you if the application is funded.

Section 4 — Health-Related Strategies

What health-related strategies have you tried to improve your health problem, including other therapies, medications, procedures, and holistic lifestyle (diet, exercise, stress management) changes? If you've tried none, what are you willing to try, and are you willing to commit to on-going lifestyle modifications throughout the grant period and beyond?

Section 5 — Additional Information

Is there anything else you would like for us to know when considering your application?

Would you like for the GVEC Board of Directors to pray for you? If yes, how would you prefer we focus our prayers?

Thank you for completing this application. The GVEC Board of Directors will review your submission and contact you regarding the status of your application.

Please Mail To:
Good Vibrations Energy Center, Good Vibes GAP
PO BOX 109
Lindsborg, KS 67456
