



## Jacquelyn Wonder Fund

Jacquelyn Wonder was an author and teacher who died in March of 2019 after suffering complications from valvular heart disease, which was originally brought on by inadequate health care in treating rheumatic fever during her childhood. Like many of Colorado Nurse-Family Partnership's clients, Jacquelyn knew poverty and deprivation as she grew up. She was also the young mother of three sons before she decided to return to college and earn her Bachelors, Masters and Ph.D. degrees.

Jacquelyn overcame those early obstacles to become the author of three best-selling books, teacher and international consultant, specializing in adult learning styles, memory skills and managing change. She and her husband, Jerry Conover, are also the proud parents of seven successful children and numerous grandchildren and great-grandchildren. Jerry Conover was one of the original founders of Invest in Kids. He is founding The Jacquelyn Wonder Fund in Jacquelyn's memory to serve as an incentive and resource for other young mothers who are overcoming deprivation and obstacles, as well as the nurse professionals who so effectively help them navigate the path of life's challenging and exciting journey.

Invest in Kids is pleased to announce that the funding is available again from the Jacquelyn Wonder Fund. Beginning Today, March 23<sup>rd</sup> funds can be requested per the process below. Requests will be accepted until the fund is depleted, at which point IIK will inform everyone.

The purpose of this fund is to provide financial help for unmet needs experienced by the families being served in the Colorado Nurse-Family Partnership (NFP), as well as unmet educational and professional development needs of nurses working in CO NFP. It is expected that all other local and personal resources have been exhausted before a request for this funding is made.

Examples of unmet needs for families that may be funded:

- Child proofing safety items
- Car seats and Highchairs
- Cribs/Pack n plays, birthing balls and prenatal vitamins
- GED courses, books, testing
- ESL classes and books
- Child/parent class enrollment
- College tuition, books, computers or other needed supplies
- Emergencies – lack of basic living needs because of COVID-19 outbreak, home eviction, car repossession, electricity shut off, etc. **\*\*Emergencies will be prioritized and reviewed ASAP upon submission\*\***

Examples of unmet educational and professional needs for nurses that may be funded:

- BSN/MSN tuition
- Certifications (IBLC or CLE for example)

### **To apply for this fund:**

- 1) Supervisor, nurse, or client (with nurse if applicable) completes part one of application below
- 2) All payment details must be provided: \$ amount, due date, may need to give entity permission to discuss payment with IIK, payment options – online, over phone, in person, card, or check (**no cash payments**)
- 3) If payment is by check, a W-9 is required. Provide all check details: Ex: name, account #, address, etc.
- 4) Applicant emails request and payment details to Matthew Manning at [mmanning@iik.org](mailto:mmanning@iik.org)
- 5) IIK will respond to requests usually within 3 weeks after the request is received. If the decision is made to grant the request, IIK staff will be in touch with the grantee to make arrangements. In the case of items that will be purchased, IIK will purchase online and ship directly to the recipient.

**\*\*If all information is not provided, IIK may ask for resubmission\*\***



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**Application Information: Part One - Request**

Client Name: Last First M.I. First Request (Type Yes or No):

Nurse Name: Last First M.I.

Nurse Phone: Nurse Email:

Agency:

Enter client's home address if this request needs to be sent to client:

Amount of request: \$

Online link to item, if applicable (if approved, IIK acting as agent in making the purchase and provides no warrantee or guarantee of the product. If item does not meet client needs, IIK is under no obligation to replace, repair or otherwise substitute product provided):

Reason for request, include evidence of exhaustion of all other resources (send attachments for additional information, if necessary):

**Signature**

Nurse Signature: Date:

Supervisor Signature: Date:

Please send the completed Part One to Matthew Manning at [mmanning@iik.org](mailto:mmanning@iik.org). Decision will be returned to you via email.

**Part Two – Approval for IIK use only**

IIK Approval: Date: