



1311 Lindbergh Plaza Center
Saint Louis, Missouri 63132

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ACCESSIBLE MODIFICATION VEHICLE GRANT

APPLICATION FOR:

\$10,000

\$17,500

\$35,000

UNSURE

PERSONAL INFORMATION

FIRST NAME: _____ MI: _____ LAST NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL (if applicable): _____

DO YOU CURRENTLY OWN A VEHICLE? _____

IF YES, ARE YOU UPDATING OR TRADING IN? _____

WILL YOU BE A PASSENGER OR DRIVER? _____

IF DRIVER, DO YOU HAVE DRIVER TRAINING? _____

IS YOUR SCI INJURY/DISEASE SERVICE CONNECTED?

YES

NO

UNSURE

HOW WOULD THIS GRANT CHANGE YOUR LIFE?
