

APPLICATION FOR FINANCIAL ASSISTANCE

Silken Twine: Solace for Pediatric Cancer Patients Inc.

Silken Twine aims to provide financial assistance for basic needs and travel assistance to children battling cancer and their families in order for families to focus on taking care of their loved ones. Travel assistance is intended for immediate and extended family members and friends. It is our hope that supporting visits from family and friends during extended hospitalizations can brighten the day of the patient and their caregiver(s).

Patient's Name: _____

Date of Birth: _____ Gender: _____

Parent/Legal Guardian's Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____

Type of Subsidy Needed (grocery store, gift card, travel assistance, other; Please specify the amount)

Mode of Delivery of Gift Card (e-card via **email** OR **postal mail**; please specify): _____

I certify that my answers are true and complete to the best of my knowledge.

I authorize release of my name and/or photo for use by Silken Twine: Solace for Pediatric Cancer Patients Inc. for promotional purposes and on the website.

Parent/Legal Guardian/Patient (if over 18 years old) Signature: _____

Date: _____

MEDICAL INFORMATION

Patient information:

Name: _____ Age: _____

Address: _____

Diagnosis: _____

Date of Diagnosis: _____

Treating Oncologist: _____

Name of the Hospital: _____

Hospital Address: _____

Description of medical condition (to be completed by attending physician/social worker)

Anticipated length of hospital stay: _____

Name of Social worker: _____

Social worker's phone number: _____

Social worker's email address: _____

Social worker's signature and date: _____ Date: _____

Any medical information will not be shared with any person or entities other than the officers and directors of the organization.

Please send completed application to: info@silkentwinecharity.org

FOR OFFICIAL USE ONLY

Date of receipt of application: _____

Sustenance amount: _____

Date of remittance: _____

Additional information (Credit card/purchase transaction # etc.):