



PO Box 3582, Martinsville, VA 24115

Email: mlccancerfoundation@gmail.org

Web: www.mlccancerfoundation.org

**PERSONAL INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: Home (\_\_\_\_) - \_\_\_\_\_ Work (\_\_\_\_) - \_\_\_\_\_ Cell (\_\_\_\_) - \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Marital Status:  Single  Married  Divorced  Widowed  Separated

Ethnicity:  White  African American  Latino  Asian  Other \_\_\_\_\_

**MEDICAL INFORMATION**

Date of Diagnosis: \_\_\_\_/\_\_\_\_/\_\_\_\_ Primary Cancer: \_\_\_\_\_ Current Stage: \_\_\_\_

New Diagnosis  Recurrence Are you in active treatment?  Yes  No

If not in active treatment, indicate frequency of follow-up:  Yearly  Every Six Months

Other \_\_\_\_\_

Please indicate type of treatment(s) received in past twelve months (check all that apply):

Chemotherapy  Radiation  Surgery  Hormonal  Other \_\_\_\_\_

**HEALTH INSURANCE INFORMATION**

Do you have health insurance?  Yes  No

If yes, please indicate type of insurance (check all that apply):

Private Insurance  Medicaid  Medicare  Medicare plus Medigap  Charity Care

VA Program

Are prescription drugs covered?  Yes  No

**HOUSEHOLD FINANCIAL INFORMATION**

Are you currently employed?  Yes  No Number of People in Household: \_\_\_\_

Family Income Sources (check all that apply):

Social Security (retirement)  Salary  Pension  Unemployment

Public Assistance  Short-Term Disability  SSD(disability)  SSI

Support from Family/Friends  Other – Specify \_\_\_\_\_

Total Annual Family Income: \_\_\_\_

**FINANCIAL ASSISTANCE NEEDS**

I need help with the following cancer-related expenses:

Medical Bills  Insurance Co-Payments  Medications  Transportation  Child Care

Home Care  Other \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Send the completed form to mlccancerfoundation@gmail.org or mail to: MLC Cancer Foundation, PO Box 3582, Martinsville, VA 24115.

MLC Cancer Foundation will review this information and contact the person requesting financial assistance.

*All information is strictly confidential and is for MLC use only.*