### EMMA'S FOUNDATION FOR CANINE CANCER, INC

### APPLICATION FOR ASSISTANCE:

Emma's Foundation for Canine Cancer raises funds for dogs who due to the owner's/caretaker's financial constraints, would not be able to have or complete cancer treatment without assistance.

Assistance is based on proven financial need.

#### TO APPLY:

1. **Alert your veterinarian** that someone from Emma's Foundation might call him/her. Give your permission to freely discuss with us all aspects of your dogs case. Veterinarians treating EFFCC dogs are encouraged to provide a discount. We will establish this with your doctor after we review your application. If your doctor will not discount fees, but you wish to receive financial assistance we may try refer you to a doctor nearby who will.

### 2. Provide financial info BEFORE you submit the application below:

- \* We will not review your application unless we have received the first page of your most recent tax return. Before you complete and submit the form below, mail us the first page of your most recently filed tax return. Make a copy of the page, cross out your social security number and mail this info to Emma's Foundation, PO Box 1115 Milton, VT 05468-1115
- If you are married filing separately, send the first page of both (yours and your spouses).
- Send other financial records to us to help us prove that you are *in need of assistance*. Send only 1 or 2 documents other than your tax return. Examples: foreclosure notice, unemployment check stubs/statements, bankruptcy documents, etc, EFFCC helps those most in need.
- 3. **Fill in and SUBMIT** the form below. After we receive your financial info (#2 above), we will review your application, contact you veterinarian and then contact you. If we do not have the funds or cannot raise funds for your dog's treatment, we will email or send a letter to you with that news. If we can, you will receive an email or letter with an offer. We will also ask that you assist with fundraising for your dog's treatment and ask that you keep EFFCC abreast of this process.

Until you receive the offer email or letter, we have not agreed to provide funding.

\* We will not review your application until we receive your tax return.

## **EFFCC Application for Assistance**

## **ABOUT YOU**

Name
Address
DOB
Email address
Phone/Cell
Are you currently employed? Y/N
*If no, mail unemployment letter to
Emma's Foundation, PO Box 1115 Milton, VT 05468-1115
Title at most recent job Employers phone
Spouse Name Spouse occupation
Household income
Project household income (current year) (last tax year)
Assets Assets savings accts
Checking acct (include pensions)
Do you receive social services? (which and how much?)
Names/Ages of anyone you claim as a dependent:
Do you own your own home? V/N

### **ABOUT YOUR DOG**

Name	Breed	Age	Weight
M/F Dogs go	ender		
-	spayed/neutered? Y/Nd/neutered, why not?		
If you have 1	pet insurance, provide	name and con	npany and policy number
• •	cer (if tumor, also say sed		
Treatment gi	iven up to now		
Treatment re	ecommended		
Your veterin	arians treatment cost (	if given)	
	give vaccinations to a do		and date given)your dog is due for rabies, we
Any other he	ealth issues your dog h	nas had (includ	e past cancers)
(Include: Nam	er organizations to who e of organization, phone rouse to your request. Did to	number, website	address, name of person you
Credit?	pplied for assistance to what was their respon		log's treatment from Care
Names/ Age	s of other pets in your	home	

## YOUR VETERINAIAN CURRENTLY PROVIDING TREATMENT

Vet name	Clinic
Phone/Fax	
Address	
Y/N - Have yo	u given your vet permission to speak with Emma's
Foundation abo	
	clinic and they have not received your permission, your application will
be denied.	
-	s your financial situation? Why do you need assistance? What Emma's Foundation <i>cannot</i> help? (limit to 100 words)
What amount a	are you able to pay towards your dogs cancer treatment?
-	eds surgery, type in the amount that you can get together in the
If your dog nee	eds chemo, type in the amount you can contribute each week.
toward treatme	lation recipients are required to contribute as much as they can ent., and to also help with fundraising. Start now putting aside can apply towards treatment.
	makes your dog special. How will you feel if you find out his art of his treatment will be funded? (limit to 100 words)

# Do you understand and agree to the following conditions that apply if you receive EFFCC assistance? Y/N

- \* EFFCC will send your veterinarian a Planned contributions letter and a copy to you. EFFCC contributes to treatment costs only as specified in that letter to the veterinarian named in that letter. EFFCC funds are never used to pay past dues fees, routine health care or any medical treatment not for cancer or palliative care, euthanasia, burial or cremation. Fees that EFFCC did not agree to pay are your responsibility.
- \* EFFCC pays the clinic as stated in the Planned Contributions letter. If fundraising efforts do not generate the goal amount, EFFCC's General Fund may contribute. When this is not possible, we will notify the clinic and you will either postpone treatment or cover the balance.
- \* You will also assist in the fundraising of your dog's treatment and keep EFFCC abreast of this process.
- \* Funds raised by EFFCC for your dog do not belong to the recipient of their dog. When a dog no longer needs treatment, when treatment is not successful, when a recipient does not comply with EFFCC policies, or when EFFCC has raised more funding than needed, funds on reserve for that dog are redistributed to the General Fund and used to help other EFFCC dogs in need to funding.
- \*EFFCC is not in any way responsible for the results of your dogs treatment, the quality of your dog's medical treatment or any treatment side effects.
- \* Everything you have stated in this application is true.

Thank you, Emma's Foundation for Canine Cancer