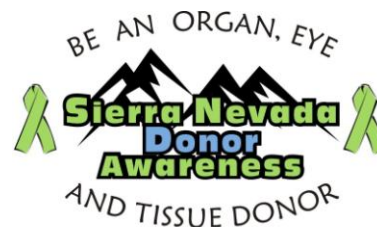


SIERRA NEVADA DONOR AWARENESS NON-EDUCATIONAL FINANCIAL AID APPLICATION



Sierra Nevada Donor Awareness financial aid is intended to help support the needs of individuals personally affected by the transplantation process as demonstrated in the community. Please note; application submission does not guaranty financial assistance. Applications will be reviewed and additional information may be requested in order to complete the process. Applicants may be rejected at the discretion of the selection committee.

Your Contact Information (Please type or print)

Name: _____ Telephone: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

The Transplant or Donor Contact Information if Different (Please type or print)

Name: _____ Telephone: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Transplant Specifics

Organ or Tissue Transplanted: _____	Name of Transplant facility: _____
Date of Transplant: _____	Name of Transplant Physician: _____

Amount of Financial Assistance Being Requested: _____ \$

Please describe your need for financial assistance. Include information regarding the transplant, and any other pertinent information for the board to consider. Please add additional pages as necessary.

The information on this application is true to the best of my knowledge. Your signature below authorizes the release any and all records associated with this application.

Date: _____ Signature: _____

Please submit your application and the following to Sierra Nevada Donor Awareness Financial Aid P.O. Box 7563, Reno, Nevada 89510-7563 or info@sierranevadadonorawareness.com.

1. Documentation or evidence of transplant, (if you are waiting for a transplant please provide the contact information for your Transplant Social Worker and provide permission for Sierra Nevada Donate Life representatives to speak to this individual regarding your financial needs).
2. Please provide evidence of financial need – Sierra Nevada Donor Awareness is mandated by law to consider financial need as a basis for financial aid to be considered by the financial aid committee.