



## Scholarship Program

Even with insurance, cancer is costly. People with cancer and their families can be devastated physically, emotionally, mentally — and financially. The All About Me Cancer Program will provide grants to qualified cancer patients in the Ogle County service area of Rochelle Community Hospital so they can better manage their road to recovery.

The All About Me Scholarship Program will help to improve patients' quality of life with valuable local resources and financial support. This scholarship offers a patient in need, **a one-time grant up to \$500 per year or as funds are available.**

### Application for Assistance from All About Me

Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Have you ever received assistance from this fund before? \_\_\_\_\_ Yes \_\_\_\_\_ No

Rochelle Community Hospital staff that is referring you for this grant \_\_\_\_\_

Please explain your crisis situation. (if you need more space, please continue on a separate sheet of paper)

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What specific assistance do you need? (if you need more space, please continue on a separate sheet of paper)

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Amount Requested \$\_\_\_\_\_

Please check any of the following below that you need assistance with and gift cards totaling your amount requested will be provided.

Transportation \_\_\_\_\_ Prescriptions \_\_\_\_\_ Wigs/Scarves \_\_\_\_\_  
Prosthetics \_\_\_\_\_ Food/Meals \_\_\_\_\_

Please acknowledge the following:

1. \_\_\_\_\_ I understand that I must be in a "crisis" situation to receive funds.
2. \_\_\_\_\_ I understand that the committee from Rochelle Community Hospital and its Foundation determines that I need this money and that I may have my request denied.

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Applicant Signature

Date of Request

UPON COMPLETION, SUBMIT YOUR APPLICATION TO MICHELLE LAPAGE.

Rochelle Community Hospital Foundation  
900 N. 2<sup>nd</sup> Street, Rochelle, IL 61068  
815-561-3110 or mlapage@rcha.net