

Financial Assistance Grant — Eligibility Criteria

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Minds Over Tumors provides financial assistance of up to \$2,500 to help families manage the costs associated with a child's brain tumor. Please review the criteria below before submitting a referral. A patient must meet all of the following to be considered. Meeting the criteria does not guarantee an award; assistance is provided on a case-by-case basis and is subject to available funds.

Eligibility Criteria

- 1. Age at diagnosis.** The patient must have been under 18 years of age at the time of their brain tumor diagnosis.
- 2. Brain tumor diagnosis.** The patient must have a diagnosed brain tumor, confirmed by a treating physician or facility.
- 3. Florida residency.** The patient must be a Florida resident. Residency may be verified through any reasonable documentation, such as a parent's or guardian's government-issued ID, a utility bill, or the treating hospital's records.
- 4. Demonstrated financial need.** The patient's family must demonstrate a need for financial assistance. Assessment of need is at the discretion of the referring hospital or provider.
- 5. Living patient.** Assistance is available for living patients to support ongoing care and related costs. This program does not provide funeral or bereavement-related assistance.
- 6. Submitted by a hospital representative.** The application must be submitted by a hospital or provider representative (such as a physician, nurse, social worker, or case manager) on the patient's behalf, not directly by the family.

Award Terms

Award amount. Assistance is provided up to a maximum of \$2,500 per patient.

One award per patient. Each eligible patient may receive one award. Assistance is not renewable or repeatable.

Use of funds. Assistance is intended for costs related to the patient's care, including treatment and medical bills, medication, travel to and from treatment, lodging near treatment, medical equipment, and household or living expenses connected to the patient's care. Funds are not provided as unrestricted cash.

Subject to available funds. All awards are contingent on the availability of funds at the time of review. Submission of a referral does not guarantee an award.

Eligibility Checklist

Before submitting, the referring representative should confirm each of the following:

☐	The patient was under 18 years old at the time of diagnosis.
☐	The patient has a confirmed brain tumor diagnosis.
☐	The patient is a Florida resident, and documentation of residency is available.
☐	The family has a demonstrated need for financial assistance.
☐	The patient is living, and the request is for care-related costs (not funeral or bereavement expenses).
☐	This referral is being submitted by a hospital or provider representative on the patient's behalf.
☐	The patient has not previously received an award from Minds Over Tumors.

To apply, complete the Hospital Referral & Financial Assistance Application and email it to darren@mindsovertumors.org