

VERIFICATION OF CHRONIC ILLNESS FORM Anne Nymark Young Adult Continuing Education Grant Submission Deadline is May 31st

Verification from medical provider is needed for patient to apply for the grant and MUST be completed and signed by **medical provider**.

The purpose of the grant program is to encourage young adults (up to 35 years old), who grew up with pediatric chronic illnesses, to further their education.

Grants are awarded to young adult students who are **United State** residents and:

1. have an ongoing chronic illness/disease with <u>initial diagnosis under 18 years old</u> (*Verification of Chronic Illness* form must be completed by doctor for eligibility).

As a requirement for this grant, "Chronic illness/diseases are defined as medical conditions that require ongoing medical attention or limit activities of daily living or both AND diagnosis occurred in childhood and has continued into adulthood".

- 2. are committed to, enrolled in or accepted for admission to full-time or part-time academic program, community college, university, career industry program, technical education, trade school, certification program, training academy, or technician program.
- 3. have completed grant application and forms.

Attention: Grant Committee 16608 Lake Heather Dr. Tampa, Fl. 33618

Applicant's Name: Primary Diagnosis: Other Diagnoses:		DOB: Date Dx:
Is this applicant receiving ongoir Date of last visit:	ng medical care/treatment?	Yes No
Does applicant have limitations	or struggles with daily living	?Yes No
Signature of Physician	Print Name	Date
Medical Facility	Email	Phone Number
Please return to applicant to submit wit Purple Playas Foundation	th grant application paperwork or	mail to:

Purple Playas Foundation
16608 Lake Heather Drive • Tampa, FL 33618 • purpleplayasfoundation.org
ppf@purpleplayasfoundation.com • EIN 61-1896617