

THE HENRIETTA LACKS FOUNDATION, INC.

Foundation Grant Application

One of the charitable purposes of The Henrietta Lacks Foundation, Inc. (“Foundation”) is to provide financial support to individuals with financial need who have made significant contributions to scientific research without informed consent or without reciprocal benefit, including without limitation contributions of biological material made unwillingly or unknowingly, or a family member of such persons.

In order to help the Foundation identify appropriate beneficiaries of the Foundation’s financial grants (“Foundation Grants”), please complete this Foundation Grant Application and submit it, with appropriate attachments, to grants@henrietalacksfoundation.org, fax it to 773-305-2963 or mail it to:

The Henrietta Lacks Foundation, Inc.
PO Box 6598
Kennewick, WA 99336-9998
United States

If you have any questions, please do not hesitate to contact the Foundation at: grants@henrietalacksfoundation.org.

PART I

Name: _____
Last First Middle

Mailing Address: _____

Mailing Address 2: _____

City, State: _____ Zip Code: _____

Phone Number: _____ Gender: _____

Email Address: _____ Date of Birth: _____

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PART II

Please complete this section to help the Foundation understand how you plan on using the Foundation Grant, should you receive one. If the question does not apply to you, please leave it blank.

1. How will this Foundation Grant be used? (College, tutoring service, social programs, medical aid, etc.)

2. Please provide the name, address, website, and any other available contact information for the educational institution or comparable entity on which you are proposing to spend the Foundation Grant.

Name: _____

Address: _____

City, State, Zipcode: _____

Website: _____

Telephone: _____

Other Information: _____

3. How much financial support are you requesting from the Foundation? *(Please provide an exact amount of financial assistance you are requesting and the duration of time for which it will be used - i.e. single class, one semester, one quarter, one year, etc.)*

Amount: _____

Duration of Time: _____

4. If you receive a Foundation Grant, might you reapply in the future? If so, when?

[continued on next page]

5. If you are applying for a Foundation Grant for educational purposes, please provide scores for any SAT's, ACT's, GRE's, or any other similar examination that you have taken. If you have not taken tests of this kind, you may skip this question.

SAT:	
ACT:	
GRE:	
Other: _____	

6. Please itemize how the Foundation Grant funds will be used (*tuition, books, specific examples of living expenses, etc. and how much of the total grant will be applied toward each*).

7. Please include either (a) or (b) in your application:
- (a) Written evidence that you have made good faith attempts to obtain government-sponsored financial aid for your anticipated costs/needs listed in Item 6 above, including, but not limited to: Medicare, Medicaid, the Federal Pell Grant, and the Federal Supplemental Education Opportunity Grant (collectively referred to as “Government Grants”)
 - (b) Written evidence that the Government Grants do not cover the anticipated costs/needs listed in Item 6 above.
8. If you are applying for a Foundation Grant to cover expenses of medical care:
- (a) Please include in your application an estimate from your medical care provider indicating the anticipated cost of the medical care in question, and
 - (b) Please include either (i) or (ii) in your application:
 - (i) Proof that your existing medical insurance does not cover the anticipated cost of the medical care in question
 - (ii) Letter from a medical provider indicating you do not have the necessary insurance coverage for the medical care in question
9. Please complete the Net Worth Statement Worksheet, attached to this application as Exhibit A, which provides the Foundation with a snapshot of the current value of your financial holdings.

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10. Please include in your application copies of Internal Revenue Service (IRS) federal tax returns for you and/or your immediate family for the last two (2) calendar years.

PART III

Please respond to the below questions in order to help the Foundation determine whether you are an appropriate beneficiary of a Foundation Grant. Note that this application will be deemed incomplete without attached responses to the below. This section is exceptionally important to the Foundation in considering your application.

1. In five hundred (500) words or less, please describe yourself and explain: i) how you qualify to receive a Foundation Grant (you must describe in detail both how you are in financial need and how you either have made significant contributions to scientific research without informed consent or without reciprocal benefit or are directly related to such a person) and ii) anything else that you would like the Foundation to know about you.
2. In five hundred (500) words or less, please explain: i) why you are applying for a Foundation Grant, ii) what you hope to accomplish with this Foundation Grant, should you receive it, and iii) what your long term educational or vocational goals are, and how a Foundation Grant will help you accomplish those goals.

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PART IV

Please provide two personal references (who are not directly or indirectly related to you, and are not members of the Foundation’s Board of Directors).

Name: _____
Last First Middle

Mailing Address: _____

City, State: _____ Zip Code: _____

Phone Number: _____ Years Known: _____

Relationship: _____

Name: _____
Last First Middle

Mailing Address: _____

City, State: _____ Zip Code: _____

Phone Number: _____ Years Known: _____

Relationship: _____

IMPORTANT INFORMATION

At its sole discretion, the Foundation may follow up with you for more information (including, without limitation, financial information) to help make its decision with regards to your Application. Please note your submission of this Application for Foundation Grant does not guarantee you the Foundation’s financial support. The Foundation will consider an assortment of factors in identifying the appropriate beneficiaries of the Foundation Grants, including, without limitation: availability of funds, number of applicants, financial status, and individual need.

Exhibit A

Net Worth Statement Worksheet

Assets

Cash on hand	\$ _____
Cash in checking account	\$ _____
Cash in savings account	\$ _____
Money market accounts	\$ _____
Market Value of Your Home	\$ _____
Estimated value of household items	\$ _____
Market value of other real estate (i.e. investment or rental property, timeshare, vacation home)	\$ _____
Stocks	\$ _____
Bonds	\$ _____
Mutual funds	\$ _____
Market value of vehicles (check www.kbb.com or www.edmunds.com)	\$ _____
Cash value life insurance	\$ _____
Current value of 401(k) plan or similar retirement account	\$ _____
Individual Retirement Account (IRA, Roth IRA)	\$ _____
Estimated value of personal items and other assets	\$ _____
Total Assets	\$ _____

Net Worth Statement Worksheet

Liabilities

Mortgage (total balance owed)	\$ _____
Home equity loan or line of credit	\$ _____
Other real estate loans	\$ _____
Auto loan or lease	\$ _____
Credit card balances	\$ _____
Student loans	\$ _____
Delinquent taxes	\$ _____
401k loan	\$ _____
Personal unsecured loans	\$ _____
Life insurance loans	\$ _____
Other liabilities	\$ _____
Total Liabilities	\$ _____
NET WORTH (Total Assets minus Total Liabilities)	\$ _____

Note: A net worth statement is a snapshot of the current value of your financial holdings. Keep in mind that the market value of your assets can change as many homeowners have found out in the current mortgage crisis. Some homeowners are finding out the value of their home has declined. That's why you should update your net worth statement at least annually.