



FLORIDA ATLANTIC UNIVERSITY

Louis and Anne Green
Memory and Wellness Center
Christine E. Lynn College of Nursing

Subsidy & Scholarship Policy

At the Louis and Anne Green Memory and Wellness Center, we are committed to making our services as accessible and affordable as possible. Through the generosity of grants, local businesses, and community fundraising, we maintain a scholarship fund to assist individuals and families who qualify for financial support. Assistance is offered as discounted rates on the following services:

Comprehensive Memory Evaluations, Mental Health Counseling, and Adult Day Center Care

Eligibility

Financial assistance is determined using a sliding fee scale based on total annual income. **Income Calculation:** Total annual income includes wages, Social Security, pensions, interest, and dividends. **Application Process:** Applicants must complete the Scholarship Policy Income Worksheet and provide proof of income. **Annual Review:** Eligibility must be reviewed annually or upon significant financial changes.

Sliding Fee Scale

Single Filers	Fee Coverage %	Joint Filers	Fee Coverage %
\$0 – \$60,000	100%	\$0 – \$90,000	100%
\$60,001 – \$65,000	80%	\$90,001 – \$95,000	80%
\$65,001 – \$70,000	60%	\$95,001 – \$100,000	60%
\$70,001 – \$75,000	40%	\$100,001 – \$105,000	40%
\$75,001+	0%	\$105,001+	0%

Important Notes

Discounts are provided only while scholarship funds are available. If funds are depleted, new subsidies cannot be granted, and existing discounts may be discontinued. Subsidy eligibility is not guaranteed and will be determined based on a thorough, case-by-case review of each applicant's situation. The Center reserves the right to modify or adjust the program based on funding availability.

Our Commitment: We recognize the financial challenges families may face and are committed to helping ensure that all individuals in need can access quality care and support.

For questions or assistance with the application process, please contact our administrative office.

777 Glades Road, Bldg. AZ 79, Boca Raton, FL 33431
Phone: (561) 297-0502 Fax: (561) 297-0505
Email: memorylane@health.fau.edu Web: www.faunursing.org/mwc

PATIENT ASSISTANCE PROGRAM APPLICATION
Memory & Wellness Center

PATIENT INFORMATION		
Patient Name	Date of Birth	
Home Address (e.g., P.O. Box or Street, City, State, Zip)		
Home Phone	Work Phone	Cell Phone
Number of Persons Living in Household (<u>Including patient</u>): ____ Adults ____ Children		
Date(s) of Service		
Name of Person Completing Form (if not pt.)	Relationship to Patient	Telephone
EMPLOYMENT INFORMATION		
	Patient / Guarantor #1	Spouse / Guarantor #2
	Employed <input type="checkbox"/>	Employed <input type="checkbox"/>
	Unemployed <input type="checkbox"/> Start Date: _____	Unemployed <input type="checkbox"/> Start Date: _____
	Retired <input type="checkbox"/> Start Date: _____	Retired <input type="checkbox"/> Start Date: _____
Current Employer (Incl. name & address)		
INCOME	Filing Single (Patient)	Filing Jointly
1. Gross salaries, wages before taxes		
2. Business Income		
3. Rental Income		
4. Investment Income		
5. Income from Estates/Trusts		
6. Alimony Income		
7. Child Support		
8. Social Security		
9. Aid to Dependent Children		
10. Public Assistance Income		
11. SSI/Disability		
12. Pension		
13. Other Income (list amount/source)		
14. Other Income (list amount/source)		
TOTAL INCOME ALL SOURCES		
PATIENT ACKNOWLEDGEMENT & SIGNATURE		
I acknowledge that the information given herein is true and correct. I authorize Memory & Wellness Center to verify any information contained in this document for the sole purpose of assessing financial need.		
Signature of Patient or Legal Representative	Date	Relationship to Patient: Self Other _____

DOCUMENTATION REQUIREMENTS

Appropriate documentation of financial hardship requires the following:

1. Income and Assets Documentation, including:
 - Must submit an IRS Tax Transcript
 - o Visit IRS Web Address: www.irs.gov/individuals/get-transcript
 - o Please refer to instructions attached.
 - Please refer to instructions attached
2. Additional documentation may be requested.
 - Social security benefits & verification letter
 - Other proof of income
3. Kindly provide a brief statement detailing your financial needs and how this subsidy will support your situation:

MEMORY & WELLNESS CENTER USE ONLY

Review Comments

Transcript types for individuals and ways to order them

You can request your IRS tax transcripts (tax records) in the following ways



Electronically:

1. Visit the IRS website: www.irs.gov/
2. Under “How can we help you?” section click on “get your tax record.”

The screenshot shows the IRS website homepage. At the top, there is a navigation bar with the IRS logo and links for Help, News, English, Tax Pros, and Sign in. Below this is a secondary navigation bar with links for File, Pay, Refunds, Credits & Deductions, and Forms & Instructions, along with a search bar. The main content area features a banner image of two women looking at a document, with the text "Helping people understand and meet their tax responsibilities". Below the banner is a notice: "The U.S. government is shut down. Services may be limited. Find details in the IRS contingency plan". The "How can we help you?" section is displayed, with several options: "Get your refund status", "Check Your Federal Tax Withholding", "Explore free filing options", "Where's my amended return", "Get an identity protection PIN", "Get your tax record" (circled in red), "Make a payment", "Apply for an Employer ID Number (EIN)", and "Find forms & instructions".

3. Continue to sign in or register for a new account. (The IRS website is secure and might require additional personal information).
4. Click on “Get Transcript Online”.
5. Choose your transcript type: “Tax Return Transcript”.
6. Enter your information, select the appropriate tax year (most recent) and any additional information requested.

Request by Phone

1. Call the IRS automated phone line: 1-800-908-9946
2. Choose the option to request a tax transcript and provide the necessary information.
3. Wait for your transcript, typically 5-15 days.

Request by Mail:

You can also request your transcript by mail

1. Visit the IRS Website: <https://www.irs.gov/forms-pubs/about-form-4506-t>
2. Click on “Form 4506” under Current version”.



[Home](#) / [Forms and Instructions](#) / [About Form 4506-T, Request for Transcript of Tax Return](#)

About Form 4506-T, Request for Transcript of Tax Return

Current year	Use Form 4506-T to request any of the transcripts: tax return, tax account, wage and income, record of account and verification of non-filing.	Related items <ul style="list-style-type: none">• About Form 2848, Power of Attorney and Declaration of Representative• About Form 4506, Request for Copy of Tax Return• About Form 4506-A, Request for Copy of Exempt or Political Organization IRS Form and Form 4506-B, Request for Copy of Exempt Organization IRS Application or Letter• About Form 4506-T-EZ, Short Form Request for Individual Tax Return
Prior year	The transcript format better protects taxpayer data by partially masking personally identifiable information. Financial data remains fully visible to allow for tax preparation, tax representation, or income verification.	
Accessible		
eBooks	Because the taxpayer identification number is masked, there is a field on the Form 4506-T  to enter a customer file number which will display on the transcript. Learn more at About tax transcripts .	
Browser-friendly forms and publications		
Mobile-friendly forms		
Post release changes to forms	Current revision Form 4506-T 	

3. Mail the complete form to the address listed on the form instructions
4. Wait for your transcript (Typically 5-15 business days)