



WELLNESS FUND APPLICATION FORM

Eligibility Criteria:

- Applicants must be registered BTSS members who are patients or survivors (Singaporeans or PRs only).
- One sibling or caregiver is eligible provided that the patient is enrolled in the same programme.

Important Note:

- BTSS will reimburse 50% of the approved programme expenses up to a cap of \$600 per annum.
- Counselling services are provided by NuLife Care & Counselling Services Limited (“NuLife”). BTSS will pay the counselling service fees directly to NuLife. As a BTSS-initiated programme, this counselling service is 100% funded, subject to a cap of \$600 per annum.
- Aesthetic treatments such as beauty spa, massage, manicure etc. and Traditional Chinese Medicine (TCM) do not qualify.
- Physiotherapy, rehabilitation or home care services are not covered by this fund. These expenses are covered by our Rehab & Home Care Grant.
- Supporting original receipts for this programme are to be submitted for BTSS’ review and reimbursement.

MEMBER DETAILS *(Please tick as appropriate)*

| | | | |
|-----------------------------|--|------------------------------------|--------|
| Name <i>(as in NRIC)</i> | | Mr | Mrs |
| | | Miss | Mdm |
| | | Others | |
| Home Address | | Gender | |
| | | Male | Female |
| | | Date of Birth <i>(DD/MM/YY)</i> | |
| Email | | Home Tel | |
| | | Mobile Tel | |

MEDICAL CONDITION

| | |
|--|--|
| Date diagnosed with brain tumour | |
| Name of hospital where you received or are receiving treatment | |
| Consultant’s Name | |



APPLICANT DETAILS *(Please tick as appropriate)*

| | | |
|--|---|--------------|
| Same as above <i>(I am applying for myself)</i> | Yes | No |
| | <i>If No, please proceed to complete ALL Sections of this form.</i> | |
| Name <i>(as in NRIC)</i> | | Relationship |
| Email | | Home Tel |
| | | Mobile Tel |

CAREGIVER/SIBLING DETAILS *(attending the same programme with the patient)*

| | | |
|-----------------------------|--|--------------|
| Name <i>(as in NRIC)</i> | | Relationship |
| Email | | Home Tel |
| | | Mobile Tel |

PROGRAMME DETAILS *(Please tick as appropriate box(es))*

In what ways does the programme enhance your (patient or caregiver) wellness.

| | |
|---|---|
| Physical skills <i>(e.g. swimming, baking, sewing, barista skills)</i> | Mental <i>(e.g. memory, speed reading or relevant intellectual pursuits)</i> |
| Creative <i>(e.g. learning and playing music on various instruments, singing, composing)</i> | Psychological <i>(e.g. psychotherapy, counselling help)</i> |
| Social <i>(e.g. Emotional Quotient (EQ), social skills training)</i> | |
| Others, please provide more details: | |

| | | | |
|---|--|--------------------|--|
| Programme Name | | | |
| Place/ Address of Programme to be conducted | | | |
| Estimated Total Programme Cost | | Programme Duration | |

**DECLARATION**

I hereby declare that all the information provided in this form is true, correct and accurate to the best of my knowledge that if any of the information provided in this form is false or inaccurate, I will be liable to repay in full any financial assistance granted. By submitting this form to BTSS, I hereby warrant that all the information I have submitted in this form is true and accurate to the best of my knowledge. I further understand that any personal data which I have provided in this form may be processed by BTSS or any of its vendors and/or subcontractors ("BTSS's connected entities") and I expressly consent to such processing for the purposes as set out in BTSS's Privacy Policy (<https://www.braintumoursociety.org.sg/privacy-policy/>).

I also warrant that I have obtained all necessary consents from any third parties for BTSS to disclose any personal data belonging to such third parties as well as for the onward disclosure or processing of such third-party personal data by BTSS.

I understand that any personal data disclosed by me herein will be retained by BTSS and its connected entities as long as any of the purposes set out in BTSS's Privacy Policy remain valid.

Applicant's Name

Applicant's Signature

Date

Grant Reference
*(Office use only)***ADMINISTRATIVE DETAILS** *(To be filled by BTSS Staff)*

| | | |
|-----------------------|--|----------|
| Status of Application | Approved | Rejected |
| Date of Approval | Fund Expires on <i>(12 months after approval)</i> | |
| Remarks (if any) | | |

BTSS Staff's Name

BTSS Staff's Signature



TERM & CONDITIONS

All BTSS Wellness Fund applications are reviewed and subject to approval by the BTSS EXCO.

1. Any BTSS Wellness Fund awarded will reimburse up to 50% of approved programme expenses and up to a cap of \$600. The exception is the counselling service that is BTSS-initiated and provided by Nulife Care & Counselling Services Pte Ltd. This counselling service is 100% funded by BTSS, subject to a cap of \$600 per annum.
2. Awarded funds will be valid for one year from date of approval. Fresh applications can be made 12 months from previous fund approval date and provided that previous approved fund has been fully utilized.
3. Only one award per member will be made in any given 12-month period.
4. BTSS at its sole discretion reserves the right to question the applicant on the information provided and request further details from the applicant either by way of a telephone enquiry or written communication.
5. BTSS accepts no responsibility whatsoever for an application lost or delayed by any mail delivery service.
6. Funds awarded are to be used for the sole purpose for which the application was made. Any changes in purpose need to be first approved by BTSS in writing. BTSS reserves the right to terminate any awarded funds in the event of unapproved use.
7. Upon approval of a BTSS Wellness Fund application, the applicant will be required to provide BTSS with either the originals, or copies of all documents to support the expenditure.
8. BTSS will report to the relevant authorities if it suspects that there have been any attempts made to obtain a reimbursement in a fraudulent manner.
9. BTSS will not, without written consent, use the applicant's details for any publicity or show details within any printed matter or online.
10. BTSS will include, but will not show individual detail, the total sum of money made available under our Wellness Fund in the BTSS annual report and accounts. Applicants may however share information about the Fund with any parties of their choice.
11. BTSS will not enter into any verbal or written discussion should it decide not to approve an application, other than to notify the applicant that they have been unsuccessful.
12. BTSS' decision is final and is not subject to appeal.
13. All applicants must reside in Singapore – the BTSS Wellness Fund is restricted to Singapore Citizens and Permanent Residents.
14. BTSS will retain within its secured database details of all applications made. Such information will not be disclosed to any third party unless a request is made by an authority entitled to demand the information from BTSS.