

## Application for Gratitude Initiative Military Educational Programs

(for additional family members)

Please update the parent information section below if it has changed since your original application.

Complete the section, obtain a copy of the student's latest grade report, proof of dependency (birth certificate or tax return showing dependents), scan these documents, and return to apply@gratitudeinitiative.org.

## Parent(s)

First Name	Last
	<u> </u>
	State: Zip:
Email address:	
Contact phone #: ()	<del>-</del>
First Name	Last
	<del></del>
Address:	
City:	State: Zip:
Email address:	
Contact phone #: ()	<del>-</del>

## <u>Student</u>

First Name	Middle		Last	
Address:			<del></del>	
City:	State:	Zip:		
Date of Birth:/	/	Gender: M	ale Female	
Race/Ethnicity: American Indian or Alaska Native Asian Black or African American				
Hispanic or Latino Native Hawaiian or Other Pacific Islander White				
Other				
Email address: (different than parents)				
Contact phone #: (				
Age: Current grade in school:				
Are you a U.S. citizen? Yes No				
Name of the school you are currently attending.				
Are you homeschooled? Yes No				
Month/Year you expect to receive your high school diploma:/				
Who do you live with?				
	Other			

Please provide a copy of your latest grade report and proof of dependency (birth certificate or tax return).