



Our MILITARY Kids, Inc.

GRANT APPLICATION FOR CHILDREN OF SEVERELY INJURED SERVICE MEMBERS

Service member must be classified as severely injured in one of the six categories designated by the Department of the VA.: burns, amputation, mental health, spinal cord injury, traumatic brain injury, or PTSD

Please complete the following information, one application per child:

Child's Name: _____ Grade: ___ M ___ F Birthdate: _____
Parent/Guardian: _____ 1st phone number: _____
Cell/Work phone: _____ Email Address: _____
Family's Postal Address : _____
Number and Street City State Zip

PLEASE VERIFY WHERE THE CHECK SHOULD BE SENT. MANY TIMES IT IS A DIFFERENT ADDRESS FROM WHERE THE CHILD PARTICIPATES IN THE ACTIVITY.

Grant Request Amount: _____ Activity (i.e., soccer, dance): _____
(Attach documentation to validate amount not to exceed \$500; Our Military Kids does not cover private school tuition, including preschool, or day care expenses.)

Organization Name: _____

Make check payable to (if different from organization): _____

Mailing Address: _____
Street City State Zip

Organization Contact Information: _____
Name Telephone Number

CONSENT TO EXCHANGE INFORMATION

I understand that additional information may be required to adequately verify eligibility for a grant. By signing this form, I am permitting a representative of Our Military Kids, Inc. to contact the case manager and/or the organization provided on this form. I also certify that all the information I have supplied is true and correct.

Military branch of severely injured service member/ Vet: _____ National Guard, Reserve, or Active Duty: _____
What mission was the service member wounded in? _____

I declare that receipt of a grant will aid in easing a financial burden that exists because of the service member's injury.

_____, am signing this form for _____
Full printed name of parent/guardian Printed name of child

SIGNATURE

I have attached a copy of ALL of the following documentation:

For veterans:

- ___ a letter from a VA case manager certifying the Veteran's status as severely injured
- ___ VA paperwork showing the breakdown of awarded percentages
- ___ DD214
- ___ copy of the child's birth certificate or DEERS 1172
- ___ documentation showing the cost of the activity (brochure, flyer, invoice, or typed letter on service providers letterhead)

For active duty service members:

- ___ a letter from a case manager certifying the service member's status as severely injured
- ___ the most recent copy of the service member's military orders moving them into a WTU or medical hold
- ___ copy of the child's birth certificate or DEERS 1172
- ___ documentation showing the cost of the activity (brochure, flyer, invoice, or typed letter on service providers letterhead)

Mail to:
Our Military Kids, Inc.
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McLean, VA 22101

Fax to:
703-734-6503

Email to: omkinquiry@ourmilitarykids.org

Questions:
Call: 703-734-6654
Toll Free: 1-866-691-6654