



BEHIND *the* BADGE

EST 2011

CHARITIES

First Responder Educational Grant Program

Applicant Information

- Full Name: _____
- Date of Birth: ____ / ____ / _____
- Phone Number: _____
- Email Address: _____
- Home Address: _____
City: _____ State: _____ Zip: _____

First Responder Information

- Current First Responder Role/Title: _____
- Agency/Department Name: _____
- Agency Address: _____
City: _____ State: _____ Zip: _____
- Supervisor's Name & Contact Information: _____
- Years of Service as a First Responder: _____

Educational Program Information

- Institution/School Name: _____
- Program or Course of Study: _____
- Degree/Certification Sought (if applicable): _____
- Program Start Date: ____ / ____ / _____
- Anticipated Completion Date: ____ / ____ / _____

Grant Request

- Grant Amount Requested (up to \$500): \$ _____
- Have you applied for or received other funding (scholarships, agency assistance, employer reimbursement, etc.) for this program?
 Yes No
If yes, please explain: _____

Email completed application and supporting documents to: educationalgrants@behindthebadgecharities.org



Eligibility Acknowledgment & Integrity Statement

- I affirm that I am a First Responder currently serving in **Fort Bend County, Texas**.
- I affirm that this grant will only be used for educational expenses directly related to my program of study.
- I understand that if my agency or another entity pays for this course in whole, I am not eligible for this grant.
- I affirm that the Behind the Badge Charities First Responder Educational Grant Program is not intended to provide profit but to support genuine educational advancement.

I understand that the **Behind the Badge Charities First Responder Educational Grant Program** is intended solely to assist first responders who are personally responsible for paying for all or part of the cost of their educational course or training. I affirm that I am not receiving, and will not receive, payment or reimbursement for the course from my agency, employer, or any other entity, in whole.

I further understand that this grant program is **not** intended to generate personal profit, but rather to support the advancement of education and training for first responders. By submitting this application, I certify that the information I have provided is true and accurate, and I agree to return any awarded funds if it is later determined that I have violated these terms.

Applicant Signature: _____

Date: ____ / ____ / ____

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