

The Cost of Courage Foundation **2024 Gold Star Scholarship Application**

\$1,000 Scholarship

Deadline: October 1, 2024

	Noi	minee Information
Date		
Name		
Date of Birth		
Address		
Phone Number		
E-Mail Address		
School		
If awarded the scholars	hip, what educational i	program would you pursue? (Please answer below)
		e Member Information
Name of Service Member/First Responder		
Relationship to Applicant		
Branch of Service/Agency/Dept		
Service Member's Rank		
KIA Date/End of Watch		
Please tell us about you	ır loved one. You may բ	provide a description of your loved one below.
		mation (if applicant is under 18 years of age)
Name of Parent / Legal	Guardian	
Relationship to Nominee		
Address		
Phone Number		
E-Mail Address		
Signature of Parent / Legal Guardian		Date:

Please write a 500 word essay in response to the following question:

As a surviving family member, how would this educational opportunity impact your life?

** Please attach your 500 word essay to this application** You may send your application using either of the following methods:

- 1) E-Mail: Send a PDF version of the application and your **typed** essay to kelly@thecostofcouragefoundation.org
- 2) Mail: Send a **typed** version of your essay along with your completed application to 1315 Piedmont Road #32909, San Jose, CA 95132

The scholarship will be awarded in November 2024.