

**Rhode Island Rainbow Girls Foundation, Inc., Scholarship Committee
Grand Assembly of Rhode Island Scholarship Committee**



Dear Girls,

Enclosed you will find an application for a scholarship from Rhode Island Grand Assembly. I have also enclosed a copy of the regulations governing our scholarship program. Please review them carefully, paying particular attention to the deadline of June 15th. The requirement for two letters of recommendation, and a transcript of your most recent grades, or a copy of your most recent semester report.

In the past we have been unable to consider some applications because they did not comply with all the requirements. I am sure you realize how disappointing that was; however, it is not fair to those who do follow instructions to make exceptions.

Please see that all information is forwarded to me in appropriate time.

In Rainbow Love and Service,

Mrs. Donna Fox, Chairman
Scholarship Committee

Mrs. Donna Fox
63 Limestone St
Warwick, RI 02889
401-738-9222
Revised: February 8, 2023

Rhode Island Rainbow Girls Foundation, Inc.
Grand Assembly of Rhode Island International Order of The Rainbow for Girls



Regulations for Scholarship Application

Scholarship assistance may be given to all current active Rainbow Girls who are members in good standing of a Rainbow Assembly in the State of Rhode Island. Although you are encouraged to apply during your senior year in high school you may apply at any time and reapply for a maximum of 4 years.

- You must maintain at least a 2.0 grade point average and be considered a **Full-Time** student with at least twelve (12) credit hours per semester.
- You must maintain at least a 2.0 grade point average and be considered a **Part-Time** student with at least six (6) credit hours per semester. Part Time students will receive a reduced amount at the discretion of the Scholarship Committee.
- If you are attending **Trade School**, you must complete the applications to the best of your ability and provide an average cost per semester. All Trade School students will be held to the same standards as full and part time students. The amount of this scholarship is at the discretion of the Scholarship Committee.

You make application through the Mother Advisor of your local Assembly, through the chairperson of the Scholarship Committee, or you may download all forms from the rainbowgirls.org website under the *girl's resource link*.

Each girl must give detailed information on the form provided by the committee, and when completed, forward all information to the chairperson of the committee (Donna Fox). All information and correspondence relating to scholarship applications and their consideration, favorable or unfavorable, is strictly confidential and should be so regarded by all concerned.

First time applicants please provide the following with your application:

- 1) A minimum of two letters of recommendation (do not ask the Mother Advisor)
Do not ask more than one advisory board member.
- 2) A copy of your current dues card
- 3) A transcript of current grades or a copy of the most recent semester report
- 4) A copy of your acceptance letter

Your application MUST be filed with the committee on or before June 15th. Half (1/2) of the scholarship amount will be payable in time for the fall term with the balance payable after receipt of your fall semester grades. Please mail or email your grades to the chairman no later than January 15th. If you are unable to attend school, you will be expected to return all scholarship funds that you received to the Rhode Island Rainbow Girls' Foundation!

*****Please note due to the recent enactment of the Rhode Island Promise those being accepted and attending the Community College of Rhode Island may still apply for other costs such as books, lab fees and transportation.**

Those reapplying for subsequent years please provides the following with your application:

- 1) A current copy of your transcript and/or semester report
- 2) A copy of current dues card.

Scholarship Application

Full Name _____ Date _____
Address _____
Social Security Number _____ Telephone _____ E-mail _____

Date of Birth _____ Place of Birth _____
Rainbow Assembly _____
Father's Name _____ Occupation _____
Father's Address _____
Will you get any financial help from your father? _____
Mother's Name _____ Occupation _____
Mother's Address _____
Will you get any financial help from your mother? _____
Approximate amount of financial assistance from parents. _____

List all those dependent on parents' income. Include ages.

What scholarships, prizes, honors, or other prizes have you received?

List any school, church, community activities

High School attended _____ Year graduated _____

College/School Attending _____ Year in September _____

Address of College/School _____

Will you be attending this school next semester? _____

If not, include the name and complete address of the school you will attend.

What type of student will you be: Full Time Part Time Trade School (please circle one)?

What is your average cost per semester? _____

What field of study? _____

Please make the following statements concerning your personal effort to earn money, including summer work.

Nature of work	Employer	Dates	Approx. income
_____	_____	_____	_____
_____	_____	_____	_____

1. Attach current transcript of semester report. []

2. First Year Applicants Only - List two references. Give names and addresses. Do not include relatives or Mother Advisor. Include letters with application.

3. Copy of current dues card. []

The statements in this application are true to the best of my knowledge.

_____ Date_____

I promise to return the money if I do not attend school or drop out of school.

_____ Date_____

I will attend and take part when I can in my home assembly during the next year.

_____ Date_____

I agree to all the rules and regulations set up by the Scholarship Committee of the Grand Assembly of Rhode Island International Order of the Rainbow for Girls and the Rhode Island Rainbow Girls Foundation, Inc. I shall use whatever grant I receive to the very best of my ability and will endeavor to carry out my plans as outlined here.

Signature of Applicant

Date

I/We have reviewed this application and agree that my/our daughter will comply with all the rules and regulations set up by the Scholarship Committee noted above.

Parent

Date

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**Rhode Island Rainbow Girls Foundation, Inc.
Grand Assembly of Rhode Island International Order
Of The Rainbow for Girls**



This form must be signed and returned by the Mother Advisor.

_____ has been

inactive_____

active_____

Very active _____

in the International Order of the Rainbow for Girls.

Mother Advisor

_____ No. _____
Assembly

Date