

# RAINBOW SCHOLARSHIP APPLICATION: ACTIVE RAINBOW GIRLS

Please complete this application form and return it to the Supreme Deputy no later than July 1<sup>st</sup> and/or December 1<sup>st</sup> of each year. Two scholarships in the amount of \$500 per year, \$250 per semester, will be awarded annually. Scholarship information must be resubmitted to the Supreme Deputy each semester.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Years in Rainbow: \_\_\_\_\_

Address: \_\_\_\_\_

Street/P.O. Box City State Zip

Assembly: \_\_\_\_\_ Mother Advisor: \_\_\_\_\_

Please list any offices held and/or honors received on the local or state level for Mississippi Rainbow:

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High School: \_\_\_\_\_ College: \_\_\_\_\_

Major/Intended Major: \_\_\_\_\_ Minor (if any): \_\_\_\_\_

Please list any high school or college activities or honors received: \_\_\_\_\_

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Please list any community or church activities in which you are involved: \_\_\_\_\_

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I freely and voluntarily provide the information requested in this application. I also waive any objections to the use of this information, as I understand that it will be used in determining my eligibility for this scholarship and related public relations efforts.

\_\_\_\_\_  
Signature of Applicant Date Signature of Mother Advisor Date

\_\_\_\_\_  
Signature of Masonic Recommendation Date Signature of Non-Masonic Recommendation Date

Please attach a copy of the following items to this application: (1) a current photograph; (2) a copy of your most recent transcript; (3) an essay not to exceed 500 words on why you should receive this award.