## 2024

## Kansas Grand Assembly Scholarship Application



The Kansas Grand Assembly Scholarship program annually awards scholarships to members of Kansas Rainbow who excel in academics and leadership in their assembly, school, and community.

Determination of awards are based solely upon the information provided. The application and attachments must be complete. Incomplete applications will not be accepted. The amount and number of the annual awards are based upon the amount of funds available each year and will be determined by the Scholarship Committee.

Deadline date for submission is June 1, 2024.

Personal Information (Print or Type)				Date:			
Name	Last	First		Middle			
INATTIC							
Address							
City, St, Zip							
E-Mail			Date of Birth		/	/	
Phone		2 <sup>nd</sup> Phone			Age		
000-000-000		000-000-000					

School Information (use additional sheet if necessary)							
High School	Locatio	n	Field of Study		Graduation Date		GPA
College/tech school (either	Locatio	Location		Field of Study		From/to Date	
attending or plan to attend)							
						-	
						-	
						-	
						-	
Cost for full year attendance	Tuition Room		& Board Book		oks Total		I
\$	\$	\$		\$		\$	

Family Information (Parent/Guardian Names)					
	First Name Last Name				
Father's Name					
Mother's Name					

Financial Aid					
(Indicate "Yes" if you have applied or plan to apply for any of the following types of assistance)					
Source	Yes No Amount (received or anticipated				
State Grant			\$		
Student Loan			\$		
Scholarships			\$		
Work/Study Program			\$		
Other:			\$		

Pers	onal Information (Use a	additional sheets if ne	cessary)	
Assembly Name		Date Joined	/	1
List Offices held				
List any awards or honors				
School organizations/activities				
List any services groups, clubs, organization, or volunteer groups you have been involved with				
	lication Submission e completed application an			
(address) (email)				
THIS	INFORMATION MUST BE	POST MARKED BY JUN	E 1, 2024	
One letter of reference of previous year.	ence from one of your Ass	sembly Advisors, signed	and dated afte	r April 1 of the
Include a current of transcript.	copy of a high school or co	llege transcript. This M	UST be your m	ost recent
A signed and dated	d copy of this scholarship	application.		
I, the undersign institute of higher learn tuition, books and other graduate.  Further, I under claimed by December 3 evidence of continued g	DECLARATION AND THIS APPLICATION WILL I ed, declare that I am applying and any funds awarded expenses directly related stand that this scholarship 1-2024 and that I must remood standing in order to relate I have read the application and it is accurate to the standing arein and it is accurate to the standing in accurate to the standing arein and it is accurate to the standing in accurate to the standing in accurate the standing in accurat	ying for a scholarship to d will be used exclusively to my education and the o is awarded for the curr main a student in good s eceive this scholarship. ation and have provided	further my eding to subsidize to subsidize to subsidize to subsidize to subsidize the subsidize to subsidize the subsidize the subsidize the subsidize subsidize the subsidize s	ucation at any he cost of ntion to ar and must be rovide
Signature (if submitted by email,	either (1) type /s [Name] or (2) affix	c a jpg of signature on the line)	Da	te