



Rhode Islanders Sponsoring Education
 11 S Angell Street, #394
 Providence, RI 02906

**SCHOLARSHIP
 APPLICATION**
 2021-22 Academic Year

This application form and all supporting documents must be completed and submitted by **March 1, 2021** to be considered. Please send to the address below:

*Kaitlin Della Grotta
 RISE
 11 S Angell Street, #394
 Providence, RI 02906*

NOTE: We will not accept incomplete or late applications.

Awards will be announced on May 5, 2021

Student Name _____ **Today's Date** _____

Date of Birth _____ **Current Grade** _____ **Current School** _____

Student Cell: _____ **Student email:** _____

Parent / Caretaker Name _____

Relationship to Student _____

Home Phone _____ **Mobile Phone** _____

Email Address _____

Home Address _____

Does the applying student currently have a RISE mentor? **Yes** **No**

Is the applying student currently on the waiting list for a RISE mentor? **Yes** **No**

How did you hear about RISE?

FAMILY HISTORY

FAMILY HISTORY OF INCARCERATION

Please provide a brief summary of the impact that incarceration of family members has had on the applying child:

Legal Name of Biological Mother:

_____ **DOB** _____
first middle last

Legal Name of Biological Father:

_____ **DOB** _____
first middle last

(Please Circle One)

- | | | |
|--|-----|----|
| 1. Is the child's biological mother currently incarcerated? | Yes | No |
| 2. Was the child's biological mother formerly incarcerated? | Yes | No |
| 3. Is the child's biological father currently incarcerated? | Yes | No |
| 4. Was the child's biological father formerly incarcerated? | Yes | No |
| 5. Does another family member have a history of incarceration? | Yes | No |

If you answered "Yes" to any of the questions above, please briefly explain the charges of the biological parent and how much time was or is being served:

Highest education level completed by the child's biological mother: _____

Highest education level completed by the child's biological father: _____

Has the family ever had any DCYF involvement? (Yes/No)

If Yes, please explain:

Is this child currently receiving counseling services? (Yes/No)

If Yes, please explain:

Please list each member of the household:

Name	DOB	Gender (M/F)	Relation to Student
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is there anything else we should know about the applicant or his/her situation?

SCHOOL INFORMATION

Name the schools the student has been accepted to for 2020-21 in order of preference:

- 1.) _____
- 2.) _____
- 3.) _____

Does the applying student have an IEP? **Yes/No**

Has the applying student repeated a grade? **Yes/No** *If yes, which grade?* _____

CURRENT SUPPORT SYSTEM

What activities is the applying student currently involved in outside of school? (ie sports, clubs, volunteering):

Who are the most important adults in this child's life?

_____	_____
<i>Name</i>	<i>Relation to student</i>
_____	_____
<i>Name</i>	<i>Relation to student</i>
_____	_____
<i>Name</i>	<i>Relation to student</i>

STUDENT ESSAY QUESTION

*Applying students: Respond to the following prompt in an essay of **800-1,000 words (2 pages minimum)**.*

Discuss the importance of education and how it relates to the challenges you have faced in your life, specifically related to parental incarceration. Why do you believe attending a private school will help you overcome these challenges?

FIANCIAL INFORMATION FORM

1. Student's Name: _____

2. Address: _____

Preferred Phone Number: _____ Home/Cell (circle one)

Email: _____

3. Student is living with: Both Parents Mother Father Guardian
Parents' Marital Status: Married Separated Divorced Widowed Single

4. MOTHER (or GUARDIAN) FATHER (or GUARDIAN)

Parent #1/Guardian Name: _____

Address: _____

Preferred Phone Number: _____ Home/Cell (circle one)

Email: _____

Annual Salary: _____

Occupation: _____

Employer's Name: _____

Employer's Phone Number: _____

5. Parent #2/Guardian Name: _____

Name: _____

Address: _____

Preferred Phone Number: _____ Home/Cell (circle one)
Email: _____
Annual Salary: _____
Occupation: _____
Employer's Name: _____
Employer's Phone Number: _____

6. What is your annual household income? _____

7. # of dependent children in Elementary School _____ High School _____
College _____

8. Are you on Public Assistance? _____ Yes _____ No

9. Amount received monthly: _____

Amount of food stamps received monthly: _____

10. If you are receiving Social Security, what is the amount received each month?

(please attach documentation)

For you \$ _____ For spouse \$ _____

For children \$ _____

11. If you are separated or divorced, how much money on a monthly or yearly basis do you receive from your spouse? _____

12. What is your monthly rent/mortgage?

13. Do you have any other source(s) of income or assets? Yes _____ No _____

14. If yes, what are they and how much annual income do they provide? _____

15. Proof of Income:

(APPLICATION WILL NOT BE CONSIDERED COMPLETE IF THIS IS NOT RECEIVED)

Each Parent/Guardian/Step-parent must include documentation of income in **TWO** of the following forms:

- Your most recent Federal and State tax returns filed (Form 1040A or 1040EZ); **AND**
- A copy of a W-2 Form and 2 pay stubs (or one month's worth of pay stubs) from your current, or most recent, job **OR**
- Documentation of public assistance (Supplemental Security Income, etc.

16. Please tell us the circumstances that make financial aid necessary:

By signing below, I declare that the information provided in this Financial Aid Form is true, correct and complete to the best of my knowledge.

Name of Parent or Guardian (please print or type):

Signature: _____

Date: _____

ADDITIONAL INFORMATION

*The following documents are **required** for a complete application:*

- **Completed Scholarship Application Form**
- **Response to the essay question from the student**
- **Copy of the most recent report card**
- **Copy of acceptance letter(s) from student's school of choice in Rhode Island for the 2021-2022 academic year (Please send as soon as this becomes available. If you do not have an acceptance letter yet, please indicate that. You will still be considered.)**
- **Copy of parent's discharge papers from ACI, other substantial proof of arrest/incarceration. Please contact us if you have trouble obtaining this information.**
- **Financial information form**
- **Current Photo of your child**

Please note that RISE has a limited number of scholarships available, therefore, acceptance into the Scholarship Program cannot be guaranteed.