### CHECK OFF LIST FOR GWAA APPLICATION

Grand Assembly of Colorado, IORG

To be completed and turned in with Application by District Deputy

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| --- | --- | --- |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Assembly:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Dates, Received by or Notes | (Checkmark) Discussed with Candidate and/or included in packet |
|  |  |  |
| Past Worthy Advisor - list term date(s) |  |  |
| Current Class Grade (At least Junior year in high school) |  |  |
| Installed as GWAA before 20th birthday  (list DOB & age at GWAA installation) |  |  |
| 1. Applicant notifies Mother Advisor of interest |  |  |
| 2. Mother Advisor notifies Advisory Board |  |  |
| 3. Mother Advisor notifies Grand Deputy and District Deputy. District Deputy answers questions and helps compile application packet for submission. |  |  |
| 1. Candidate for GWAA questionnaire completed  (3 pgs.) |  |  |
| 1. Color Photo of Applicant |  |  |
| 1. Copy of Application to join Rainbow |  |  |
| 1. Parent letter giving permission and support for their daughter to serve. Letter should include Girl’s DOB. |  |  |
| 1. Written Theme (Why I want to be Grand Worthy Advisor) |  |  |
| 1. Letter from Advisory Board Chairman on behalf of Advisory Board stating their support if elected |  |  |
| 1. Recommendation Letter from Mother Advisor |  |  |
| 1. Recommendation Letter from the applicant’s Principal, Counselor, or College Advisor |  |  |
| 1. Recommendation Letter from Girl’s Minister, Youth Pastor or Other Church Leader OR a short-written essay entitled “How Rainbow’s Lesson of Religion Influences My Life.” |  |  |
| 1. Recommendation letter from District Deputy |  |  |
| 4. District Deputy meets with candidate and parents to answer questions. Go over “GWAA/GWA Expectations, Requirements and Other Information” form |  |  |
| * Explain she will be busy for 2 years – deadlines must be met, she will be expected to travel |  |  |
| * She cannot marry during the 2 years |  |  |
| * There will be expenses that will not be reimbursed |  |  |