

# Rainbow Advocate Program Scholarship Award

## Scholarship Overview

The International Institute for Trauma and Addiction Professionals (IITAP) offers the **Rainbow Advocate Program Scholarship Award** to support mental health professionals seeking specialized training to provide affirming, evidence-informed care for LGBTQIA2+ communities.

The scholarship covers registration costs for both **Rainbow Advocate & Educator (RAE)** and **Rainbow Advocate Clinical Specialist (RACS)** training modules.

Eligible applicants are licensed mental health professionals (LMFT, LPC, LCSW, LMHC, or equivalent) or interns pursuing licensure.

Applicants must demonstrate financial need and describe how they will use the training to better serve LGBTQIA2+ individuals and communities.

## Scholarship Coverage

IITAP will award scholarship recipient(s) registration for both RAE and RACS training modules.

Recipients are responsible for all other expenses, including:

- Travel and lodging costs for in-person training
- Equipment and internet access required for online training
- Any additional costs not covered by the scholarship

**Note:** Individuals who have previously received an IITAP-administered scholarship are not eligible to apply.

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## Application Requirements

To be considered, applicants must submit:

1. **Personal Statement** (maximum two pages) describing:
  - o Professional background

- o Career goals
- o How Rainbow Advocate Program training will support those goals
- o Why providing affirming care is an important part of their professional path

## **2. Two Professional Letters of Recommendation**

- o Letters should support the applicant's qualifications, career goals, and commitment to serving LGBTQIA2+ communities.

## **3. Acknowledgment of Financial Need**

- o Complete the financial need acknowledgment included with this application.

## **4. Signed Applicant Acknowledgment**

- o Sign the acknowledgment of application criteria and requirements found on the final page of this application.

**Please Note:** Incomplete applications will not be reviewed.

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## **Selection Criteria**

A Selection Committee appointed by IITAP will review all completed applications and select scholarship recipient(s).

Applications will be evaluated based on:

1. Commitment to serving LGBTQIA2+ communities, as demonstrated in the personal statement
2. Strength of professional recommendations
3. Professional presentation of the application

Scholarships will be awarded to applicants who best demonstrate commitment to affirming care, community impact, strong professional recommendations, and financial need.

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## **Award Process**

The Selection Committee meets annually to review applications and select scholarship recipients.

Alternate recipients may be selected if:

- A recipient is unable to attend one of the next two Rainbow Advocate training series;  
or
- A recipient does not submit written acceptance within the designated timeframe after notification.

Recipients will be notified directly by IITAP and may be publicly announced following acceptance of the award.

## Recipient Responsibilities

Scholarship recipients are required to:

1. Submit written acceptance of the award.
2. Identify the upcoming RAE and RACS Module 1 training they plan to attend.
3. Notify IITAP of any changes to contact information or employment status.

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## Submission Requirements

**Application deadline:** October 31, 2026

Submit all application materials as a single package via email or file-sharing service (attachments, Dropbox, etc.) to:

[info@iitap.com](mailto:info@iitap.com)

After confirming your submission is complete, please await notification regarding scholarship decisions.

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## Application Checklist

Please arrange application materials in the following order:

- Signed Applicant Acknowledgment
- Personal Statement
- Completed IITAP Financial Aid Application
- Two Professional Letters of Recommendation

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## Applicant Acknowledgment

I have read and understand the Rainbow Advocate Program Scholarship Award requirements and certify that, to the best of my knowledge, all information submitted in this application is accurate and complete.

If selected as a scholarship recipient, I grant IITAP permission to publish or reproduce my personal statement on its website, marketing materials, and other electronic media. I understand that I retain full ownership of my work, that no substantive changes will be made without my permission, and that I will not receive compensation or royalties for its use.

Applicant Name (Printed): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I am requesting financial assistance to attend the Rainbow Advocate Program training.

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## Award Information

How did you learn about this scholarship program?

IITAP Promotion

IITAP Website

Current IITAP Member

Other (please explain): \_\_\_\_\_