Application Form

Empowering Our Future, One Person at a Time

About The Rahm Foundation: Founded in 2007 by Dr. Christina Rahm, we are dedicated to creating equal opportunities for single-parent families, children, and women, especially in marginalized groups. Our focus areas include education, health, business, arts, athletics, and environmental sustainability.

Our Impact: 15+ scholarships awarded | 30+ mentees empowered | $500,000+ in support provided

APPLICATION TYPE

Please check **ONE** box below:

☐ I want to donate to the Rahm Foundation

☐ I am seeking support/donations from the Rahm Foundation

SUPPORT REQUEST INFORMATION

(Complete this section if you are seeking support/donations)

Personal Information

Full Name:

_____

Email Address:

_____

Phone Number:

_____

Current Address:

_____

_____

Date of Birth:

_____

Type of Support Needed

Please check the type of support you are seeking:

☐ Educational Scholarship

☐ Mentorship Program

☐ Health / Wellness Support (including athletics or physical development)

☐ Business Development Support

☐ Arts / Music Support

☐ Environmental Project

☐ Other (please specify): _____

Primary Category (check all that apply):

☐ Single-Parent Family
☐ Child / Youth
☐ Women
☐ Marginalized Group

Background & Current Situation

Please describe your current situation, challenges, and why you are seeking support:

_____
_____
_____
_____
_____

Current Education Level:

☐ Elementary School
☐ Middle School
☐ High School
☐ Undergraduate College
☐ Graduate School
☐ Other: _____

School / Institution Name:

_____
_____

Goals & Support Details

Your Goals and Aspirations:

_____
_____
_____
_____
_____
_____

Amount of Support Requested (if applicable): $

_____
_____

Timeline Needed:

_____
_____

References

References (Please provide 2-3 references- name and phone):

_____
_____
_____
_____

SUPPORTING DOCUMENTS

Please attach any supporting documents including transcripts, recommendations or proof of need.

APPLICANT CERTIFICATION

I certify that all information provided in this application is true and accurate to the best of my knowledge. I understand that false information may result in disqualification from consideration for support or membership.

Signature: _____

Printed Name: _____

Date: _____

For Questions or Assistance:

Please visit: www.therahmfoundation.com

Email completed applications to: applications@therahmfoundation.com
Thank you for your interest in The Rahm Foundation!
All applicant information will remain confidential and used only for review.
We will review your application and contact you within 2 - 4 weeks.

Before submitting your application, please review and confirm that you have completed all required sections and included all supporting materials.

Personal Information

- ☐ Full name, email address, phone number, and current address are filled in.
- ☐ Date of birth is provided.

Application Details

- ☐ Selected Application Type (donating or seeking support).
- ☐ Checked the appropriate Type of Support Needed box(es).
- ☐ Selected your Primary Category (Single-Parent Family, Child/Youth, Women, Marginalized Group).

Written Sections

- ☐ Completed the Background & Current Situation section.
- ☐ Described your Goals and Aspirations clearly.
- ☐ Included the Amount of Support Requested (if applicable).
- ☐ Specified the Timeline Needed.

References

- ☐ Provided 2–3 references with names and phone numbers.

Supporting Documents

- ☐ Attached required documents (e.g., transcripts, recommendation letters, proof of need, etc.).

Certification

- ☐ Signed and dated the Applicant Certification section.
- ☐ Printed your name clearly under the signature.

Submission

- ☐ Saved a copy of your completed application for your records.
- ☐ Emailed your completed form and attachments to: applications@therahmfoundation.com
- ☐ Confirmed that all attachments open correctly before sending.