



Scholarship Recommendation Form

Applicant's Name	
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Name of Recommender:	Title/Position:	Contact Information
		Email Address:
		Phone Number:

1. How do you know the applicant?

2. What do you consider as the applicant's main strength(s)?

3. Please rate the applicant in each of the below areas.

Area	Excellent	Above Average	Average	Below Average	Not Able to Rate
Honesty and Integrity					
Leadership Ability/Skills					
Personal Initiative/Motivation					
Character					
Dependability					
Commitment and Follow Through					
Social Ability					

Additional Comments:

Recommender's Signature

Date