

## **Recommendation Form**

To be included with Scholarship Application 2017

You have been asked to submi	t an evaluation	for:				
Please keep your com	ments confide	ential and do	not sha	are them w	ith the appl	licant.
Please complete the formula envelope with your signification packets postmar packet does not include Reconstruction and will not be constructed to other students,	gnature actived on or be ommendation sidered.	ross the s fore <u>Saturd</u> Forms, the	<b>seal</b> . <i>A</i> ay, Apri scholars	Applicants I 15, 2017 hip submis	must have . If the ap	e complete
Parameter	Exceptional	Excellent	Good	_	Below	Unable
Motivation to learn at a higher level	(Top 2%)	(Top 10%)	Good	Average	Average	to Judge
General Academic Ability						
Ability to express ideas well						
Emotional & personal maturity						
Self-confidence						
Sense of Responsibility						
Personal Initiative Potential for Successful Collegiate Study Overall, I would rank this candidate with other						
applicants  Provide any comments that ma	y help explain y	your evaluation	on of the	applicant.		



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	comments that may assist i en's Organization Scholarsh	n evaluating this applicant's potential for the Tangipahoa ip.
	of your contact(s) with this a	applicant?
Approximately how	long have you known this a	applicant?
How well do you kn	low this applicant?	
Casually	Well	Very Well
Person Providing	this Recommendation:	
Name (Please Print	t)	
Signature		Date
Position / Organiza	tion	
Address		
City, State, Zip Coo	le	

Thank you for taking the time to evaluate this applicant for consideration for the Tangipahoa Professional Women's Organization's 2017 Scholarship.

Return Recommendation Form directly to the applicant in a <u>sealed</u> envelope with your signature across the seal.