

CONFIDENTIAL REFERENCE FORM

Thank you for providing a reference for the student named below, who is applying for a District/ Authority Scholarship in the indicated area of interest. Please complete the form and return it to the student in a sealed envelope with you signature across the envelope flap. Enclosure of additional information on a separate sheet of paper is also encouraged.

Student Name: _____

Area of Interest: _____

1) How long and in what capacity have you known the applicant?

2) Please rate and comment on the applicant’s quality of attributes

	Poor	Fair	Good	Very Good	Excellent
Initiative/Motivation					
Leadership					
Creativity					
Critical Thinking					
Communication Skills					

3) Please comment on the applicant’s unique strengths as they pertain to their chosen area of interest. Please include examples that illustrate the applicant’s strengths.

4) Other comments you wish to make in support of this applicant.

Your Name _____ Position _____

Signature _____ Date _____