



LETTER OF RECOMMENDATION FORM

Please note, **two (2) letters of recommendation** are required with your application packet. Please give each individual you ask a copy of this form. They may use this form or they may prepare the letter on letterhead, addressing the points outlined below.

Student Name: _____
(LAST) (FIRST) (MIDDLE INITIAL)

DIRECTIONS— The student who requested that you complete this form is applying for an *ASSIST-A-GRAD* scholarship. Sponsors of these scholarships find candid evaluations helpful. This form is for your convenience. Any letter format will be accepted. Please sign and date your letter. Upon completion please return this recommendation to the student applicant. Please add additional page if necessary.

- How long have you known the applicant?
- In what capacity have you known the applicant?
- What are the first words which come to mind to describe the applicant?

Academic Characteristics:

Personal Characteristics:

Special Aptitudes, Talents, Accomplishments:

PRINT YOUR NAME: _____ POSITION: _____

SIGNATURE _____ DATE: _____
