

RECOMMENDATION FORM

Madden Merit Scholarship Award Applicant

PLEASE TYPE

Applicant Name:							
LAST	LAST			FIRST			
How well do you know this [applicant?	Very we	II ☐ Re	asonably w	vell 🗌 Sor	newhat [Slightly	
Length of time you have known the applicant and in what capacity:							
In one sentence, characterize this applicant:							
What are the first three adjectives that come to mind in describing this applicant?							
1	2			3			
Do you have any reservations about recommending this student? If so, explain. (Please mention any liabilities this student may present to a merit-based scholars program.)							
RATINGS: Compared to other college-bound students, or students in college, please rate the student. (Check one box for each.)							
	BELOW AVERAGE	AVERAGE (45-65%)	GOOD (65-85%)	VERY GOOD (85-95%)	EXCELLENT (95-98%)	ONE OF TOP FEW EVER	
Dedication/Commitment to Task							
Community/Volunteer Involvement							
Character							
Potential for Future Leadership/Service							
Overall Recommendation							
Name of Person Completing this Form			Title/Position				
School							
School Address	Address			Telephone (Ext.)			
City State	State			Zip Code			
Signature (Signature of writer)	-			Date			

Please return the completed recommendation directly to the student. Please enclose in a sealed envelope with your name written across the seal. The student will submit this recommendation with their complete scholarship packet. Thank you.