

STUDENT RECOMMENDATION FORM#2

Times New Roman 12-Font Type Required

Student Name:

is applying for a scholarship. You have been selected by the student to complete this recommendation form on his/her behalf. Please comment in the space below regarding this student, emphasizing personal characteristics that you have observed such as integrity, dependability, initiative, punctuality, adaptability, etc.

Note: You may attach a letter of recommendation in place of this form.

Comments:

Print Name:

Position:

Signature:

Date:

Student Waiver: A provision of the Family Education Rights and Privacy Act of 1974 allows students to review recommendations unless the student waives the right in writing.

I WAIVE THE RIGHT TO REVIEW THIS RECOMMENDATION FORM.

Student Signature _____ Date _____

Deadline to submit The Victor M. Cooper and/or The Saunders Montague Scholarship Award applications to the Career Center: Wednesday, February 5th, 2020 at 2:30 p.m.

Incomplete applications will not be considered.