

## Riverside Community College District ▪ Scholarship Evaluation Form

**Name of Applicant:**

**Student ID# or SSN:**

**To the Evaluator:** Scholarship applicants must submit an Evaluation Form or Recommendation letter when applying for RCCD scholarships from at least one qualified individual. The Evaluation form *must* include your name, title and contact information. The Evaluation Form should be in an electronic format and emailed to the student. If this is not possible, you may give the student a hard copy of this Evaluation Form and the student will be required to scan it in order to submit it. The application deadline is **Wednesday, December 19, 2012**. The Evaluation Form or Recommendation letter must be submitted by the applicant at the same time as they submit their scholarship application on-line. Please return the Evaluation to the student in plenty of time for them to meet the deadline.

1. How long have you known the student and in what capacity?

2. Please rate the applicant on the following in comparison with other students of the same level:

	Exceptional	Above Average	Average	Below Average	No information
General Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation and Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to Learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Imagination and Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills/Leadership Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential to Succeed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Compared to other students, I would rank this applicant in the top:

1%    
  5%    
  10%    
  25%    
  50%

4. Overall endorsement of applicant:

Highly Recommend    
  Recommend    
  Recommend with reservations

5. Optional: Please provide any additional comments about the applicant on a separate page. For example: Strengths and accomplishments, background and experiences, family responsibilities, extenuating circumstances and why you recommend this applicant for the scholarship. This will assist the committee and/or donors evaluate this applicant.

**Printed Name:**

**Title:**

**Date:**

**E mail Address:**

**Phone Number:**