

**FOROUTAN FOUNDATION**  
18101 Von Karman Avenue, Suite 750  
Irvine, CA 92612  
(877) 968-6328

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**LETTER OF RECOMMENDATION**

Please write a letter of recommendation for the applicant, addressing personal qualities such as: character, maturity, independence, special talents, qualities, etc. Please mail the letter of recommendation in a sealed envelope with your signature written across the flap to the address above. **The deadline for all application materials to be received by the Foundation is May 15, 2015.**

**Note: This form will be void if all sections are not filled out.**

Section 1: Evaluation

Print Applicant Name: \_\_\_\_\_

Characteristic	N/A	Below Average	Average	Above Average	Outstanding
Energy & Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Originality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desire to Learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 2: Letter of Recommendation

Please attach your typed letter of recommendation not to exceed one page.

Section 3: Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship to Applicant

\_\_\_\_\_  
Phone Number