



## Letter of Recommendation Form for Scholarships

Please include one to three completed recommendation forms with your application (you may make additional copies of this form). Teachers, counselors, supervisors, or others who can talk about your career goals, financial need, and/or academic record should complete the form(s). Friends or classmates should only complete this form if they have a connection to you in a leadership role.

**Note:** A spouse, parent, or other family member should not complete the recommendation form.

### TO BE COMPLETED BY SCHOLARSHIP APPLICANT

Applicant's Name: \_\_\_\_\_ GRCC Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### TO BE COMPLETED BY REFERENCE

Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor	Unknown
Commitment to their program of study . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Genuine interest in learning . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likelihood of academic success . . . . .	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>
Integrity . . . . .	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>
Commitment to excellence . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment to community . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the space provided or on a separate attached piece of paper, please explain why this individual is deserving of a scholarship. (Please limit your response to no more than one page.)

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Reference Name: \_\_\_\_\_

Title / Occupation: \_\_\_\_\_

How do you know the applicant? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return the completed form to the student for inclusion in his/her application materials.  
All materials must be submitted by 5:00 p.m. on April 30, 2014. Late materials will not be accepted.**