

KRUM PTO SCHOLARSHIP LETTER OF RECOMMENDATION

*** Please include three Letters of Recommendation with your application. ***

Student's Name: _____

To the student: This form is to be completed by current and/or past instructors and/or employers. Letters from friends, relatives or other students will not be accepted.

To the Evaluator: Please complete this form. You may use the back of this page and additional pages if necessary. This form will become part of an open file available to the student. The reference included in the file will be considered non-confidential.

Please rate the student in each of the following categories:

Category	Superior	Above Average	Average	Below Average
Academic Achievement				
Self-Discipline				
Strength of Character				
Written and/or Oral Expression				
Creativity				
Overall Evaluation				

What is your relationship to this student? _____

Please include any additional comments regarding this student or attach a letter of recommendation to this page.
