

Community Foundation of Boone County
Scholarship Recommendation Form

Name of Applicant: _____
Last
First
Middle
Social Security

Name of Scholarship: _____
 High School Attending: _____

This form should be postmarked/returned on or before Friday, January 25-Lilly scholarship
February 22-April 15, 2008- (check specific scholarship for deadline)
 To: Guidance Department at your high school

We are interested in learning about this student's academic and personal qualifications for college. Please check the appropriate category.

	Uncertain	Average	Good above avg.	Excellent	Top
Creative, original thought	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____
Independence, initiative	_____	_____	_____	_____	_____
Potential for growth	_____	_____	_____	_____	_____
Contribution to community	_____	_____	_____	_____	_____
Contribution to school	_____	_____	_____	_____	_____

In addition, why would you recommend this student for scholarship assistance? Give us three (3) examples of this candidate's strengths. TYPED

Signature: _____

Print name: _____

Position: _____

Date _____

Length of time known
applicant: _____