Rainbow Alumni Youth Supporters Mrs. Pearl B. Mills Scholarship SCHOOL REFERENCE FORM

Applicant Name:	 	
Reference Name:		
Position/Occupation:		
School Name:		
Street Address:		
Phone:		
Email Address:		

- 1. How long have you known the applicant?
- 2. Selection for this scholarship is based on scholastic record, personal need, and service. The scholarship is intended to make a financial contribution to a college student who has completed or will complete 30 college credit hours and is responsible, demonstrates leadership qualities, dedicated to her education and is worthy of this monetary aid. Realizing that scholarships are limited and that there are many deserving applicants, do you feel this applicant should receive this scholarship? Please be specific.

3. What is your scholastic evaluation and opinion of her probable success in college?

Please answer the following questions by circling the number, in your opinion, that best reflects the attributes of the applicant. A score of 5 would be the highest or most significant amount.

Sense of responsibility	1	2	3	4	5
Ability to work with others	1	2	3	4	5
Reliability	1	2	3	4	5
Moral support from family	1	2	3	4	5
Honesty and integrity	1	2	3	4	5

Any additional comments that we should know about this applicant?

Thank you for your time in filling out this reference for this applicant!

Signature:

Date: _____

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