

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?

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