

## Alverno College Institutional Scholarship Recommendation Form

This form is to be used for Alverno College institutional scholarships. If you prefer, you can write a traditional letter of recommendation in place of this document. Please submit this document to the applicant or the Alverno College Financial Aid Office directly.

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

Applicant Name: \_\_\_\_\_

Scholarship(s) Applicant is Applying For: \_\_\_\_\_

Your information (who is writing recommendation):

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

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone number: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

In what capacity have you known the applicant (circle one):

Peer                  Employee                  Co-worker                  Instructor/Staff member                  Other

Rate the applicant in the following areas. Circle the best response. 1= Unacceptable. 5= Outstanding.

Quality	1	2	3	4	5	Not Observed
<b>Communication Skills</b>	1	2	3	4	5	N
<b>Leadership Ability</b>	1	2	3	4	5	N
<b>Self-Confidence</b>	1	2	3	4	5	N
<b>Integrity</b>	1	2	3	4	5	N
<b>Responsibility</b>	1	2	3	4	5	N
<b>Academic Ability</b>	1	2	3	4	5	N
<b>Community Service</b>	1	2	3	4	5	N
<b>Participation In Class</b>	1	2	3	4	5	N
<b>Attendance</b>	1	2	3	4	5	N

Please expand on the areas rated above, identifying the applicant's greatest strength(s) in reference to how well she is deserving of this scholarship.

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Do you recommend the applicant for this scholarship?

- Yes, without reservation.
- Yes, with some reservation (please explain)
- No. (please explain)

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Any additional comments?

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