

Skills For Hope Foundation

Scholarship Recommendation Form

The applicant has asked you to give them a recommendation as he or she has applied for a Skills For Hope Foundation Scholarship. In order for the applicant to be considered, we must receive this form before the deadline date. Please email the completed form to info@skillsforhope.org. Thank you!

Applicant: First Name:

Last Name:

Referee: First Name:

Last Name:

Address:

Email:

Position:

How long have you known the candidate?

What is your relationship to the candidate?

Please comment on your knowledge of the candidate's: academic potential/performance, motivation, work ethic, character, financial need and community service activities. **Please include, why you feel the candidate should be given this scholarship.** All information provided will be kept confidential.

