



RECOMMENDATION FORM

Madden Merit Scholarship Award Applicant

PLEASE TYPE or PRINT NEATLY

Applicant Name: _____
LAST FIRST

How well do you know this applicant? Very well Reasonably well Somewhat Slightly

Length of time you have known the applicant and in what capacity: _____

In one sentence, characterize this applicant: _____

What are the first three adjectives that come to mind in describing this applicant?

1. _____ 2. _____ 3. _____

Do you have any reservations about recommending this student? If so, explain. *(Please mention any liabilities this student may present to a merit-based scholars program.)*

RATINGS: Compared to other college-bound students, or students in college, please rate the student. *(Check one box for each.)*

	<small>BELOW AVERAGE</small>	<small>AVERAGE (45-65%)</small>	<small>GOOD (65-85%)</small>	<small>VERY GOOD (85-95%)</small>	<small>EXCELLENT (95-98%)</small>	<small>ONE OF TOP FEW EVER</small>
Dedication/Commitment to Task						
Community/Volunteer Involvement						
Character						
Potential for Future Leadership/Service						
Overall Recommendation						

Name of Person Completing this Form _____ Title/Position _____

School/Company _____

Address _____ Telephone (Ext.) _____

City _____ State _____ Zip Code _____

Signature *(Signature of writer)* _____ Date _____

Please return the completed recommendation directly to the student. Please enclose in a sealed envelope with your name written across the seal. The student will submit this recommendation with his/her complete scholarship packet. Please DO NOT remit to Scouting office. Thank you.