Scholarship Applicant Recommendation Form

DIRECTIONS:	The person who is asked to complete this recommendation for you should be informed of the general nature and purpose of this educational award. Please type the information requested below. Please begin by completing the section above Question 1. The completed form should be returned to: Scholarship Committee, Department of Languages and Literatures of Europe and the Americas, French Division, Moore 483, University of Hawai'i at Mānoa, 1890 East-West Rd., Honolulu, HI 96822.

Name of Applicant: _____ Proposed Field of Study: _____

Reference requested from: _____ Title: _____

Institution: _____ Mailing Address: _____
_____
_____

TO BE COMPLETED BY EVALUATOR

1. How well, how long, and in what capacity have you known the applicant? _____
_____
_____
_____

2. How firm is the applicant's commitment to his/her proposed field of study? _____
_____
_____
_____

3. In what way would study abroad contribute to his/her academic development? _____
_____
_____
_____

4. In comparison with other students whom you have known at comparable stages of their careers, how would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE
Leadership				
Initiative				
Seriousness of purpose				
Adaptability				
Maturity				
Emotional Stability				

Please cite some specific examples of how in your association with the applicant, he or she has demonstrated the above qualities. Use a separate page, if necessary. _____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Is this information to be treated as confidential? **Yes: _____** **No: _____**

_____ _____ _____
Signature Title/Position Date