

SCHOLARSHIP RECOMMENDATION FORM

CALIFORNIA STATE UNIVERSITY, STANISLAUS TURLOCK, CA 95382 FOR ACADEMIC YEAR 2010-2011

(Must be completed by faculty member of college or university or high school counselor or faculty member if incoming freshman)

Name of student:

1. **How long have you known the applicant?**
2. **On what do you base your recommendation of the applicant?** (please check)
Personal acquaintance School records
Reports of instructors Other

(Explain)

3. **Please give your personal appraisal of the applicant:**

Outstanding Excellent Good Average

Academic Performance

Motivation

Creative ability

Leadership

4. **Please comment on any exceptional scholastic abilities and/or other accomplishments exhibited by the applicant.**

Signature _____ Title

Date

Print Name

School

This completed form is to be returned to:

Financial Aid/Scholarships Department
California State University, Stanislaus
One University Circle, Turlock, CA 95382

DEADLINE DATE:

March 2, 2010