



One University Circle, Turlock, CA 95382
 Telephone: (209) 667-3336 * Fax: (209) 664-7065

2018-2019 Scholarship Recommendation Form

STUDENT INFORMATION: To be completed by the applicant.

Student Name: _____ Warrior ID#: _____

Address: _____
Street City State County Zip

Home Phone: _____ Email: _____

RECOMMENDATION: To be completed by person providing recommendation.

How long have you known the applicant? _____

In what capacity have you known this applicant? _____

Please indicate below, your personal rating of the applicant:

Academic Performance: Outstanding Excellent Good Average

Dependability: Outstanding Excellent Good Average

Motivation: Outstanding Excellent Good Average

Leadership: Outstanding Excellent Good Average

Please explain what you know about the applicant and why he/she is deserving of a scholarship.

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

Signature: _____ Date: _____

Printed Name: _____ Title: _____

E-mail Address: _____ Phone: _____

Please return this recommendation form to the applicant. It is the applicant's responsibility to submit the completed recommendation form by uploading it to their online scholarship application or submitting it to the Stan State Financial Aid and Scholarship Office in MSR 100 by **March 2, 2018**.