



### CONFIDENTIAL REFERENCE FORM

Thank you for providing a reference for the student named below, who is applying for a District/Authority Scholarship in the indicated area of interest. Please complete the form and return it confidentially to the Career & Post-Secondary Advisor at the student’s school. This may be in a sealed envelope with your signature across the envelope flap or via email directly from you to the Career & Post-Secondary Advisor.

Student Name \_\_\_\_\_ Student’s school \_\_\_\_\_

Career & Post-Secondary Advisor Name \_\_\_\_\_ Focus area \_\_\_\_\_

Career & Post-Secondary Advisor Email \_\_\_\_\_

1) How long and in what capacity have you known the applicant?

\_\_\_\_\_  
\_\_\_\_\_

2) Please rate and comment on the applicant based on your experience:

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Minimal</u>	<u>N/A</u>
Initiative/Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaboration/Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort/Attitude/Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3) Please comment on the applicant’s unique strengths as they pertain to their chosen focus area. Include examples that illustrate the applicant’s strengths.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Other comments you wish to make in support of this applicant.

\_\_\_\_\_  
\_\_\_\_\_

5) Your Name \_\_\_\_\_ Position/Organization \_\_\_\_\_

Email and/or phone number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_