



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

2024-2025 Scholarship Recommendation Form

STUDENT INFORMATION:

Student Name: _____ Warrior ID#: _____
 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:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Dependability:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Motivation:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Leadership:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> 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: _____

All Scholarship Recommendation Forms must be uploaded to a student's scholarship application by
April 2, 2024 for scholarship consideration.

IMPORTANT: Recommenders are NOT required to complete this form and may choose to submit their recommendation on letterhead instead.