Clear Lake High School Boys Soccer Booster Club

Scholarship Recommendation Form

NAME OF APPLICANT: ­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The player named above is applying for a scholarship. To help the scholarship committee evaluate players, we would appreciate your assistance in completing this form and returning it to the scholarship committee, post marked by *Thursday, March 29, 2018.* Please mail this reference to

Clear Lake High School Boys Soccer Booster Club,

2437 Bay Area Blvd #275,

Houston, Texas, 77058.

YOUR NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR ORGANIZATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR RELATIONSHIP TO THE APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

QUESTIONS:

 How many years have you know the applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any memorable accomplishments? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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In making the following ratings, please keep in mind that they will be used to compare this player with other capable players. Please make them as realistic as you can.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | BELOW AVERAGE | AVERAGE | ABOVE AVERAGE | EXCELLENT | TRULY OUTSTANDING |
| ATTITUDE |  |  |  |  |  |
| CONFIDENCE |  |  |  |  |  |
| DEPENDABILITY |  |  |  |  |  |
| LEADERSHIP |  |  |  |  |  |
| SENSE OF HUMOR |  |  |  |  |  |
|  | BELOW AVERAGE | AVERAGE | ABOVE AVERAGE | EXCELLENT | TRULY OUTSTANDING |
| RESPECT FOR OTHERS |  |  |  |  |  |
| INDEPENDENCE |  |  |  |  |  |
| CITIZENSHIP |  |  |  |  |  |
| RESPECT FROM PEERS |  |  |  |  |  |
| REACTION TO SETBACKS |  |  |  |  |  |
| REACTION TO CRITICISM |  |  |  |  |  |

ADDITIONAL COMMENTS

REFERENCE SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_