



GWYNETH'S
GIFT

Gwyneth's Gift Foundation Scholarship Program Student Applicant Recommendation Form

Applicant's Name: _____

You have been asked to provide information concerning the above applicant for a Gwyneth's Gift Foundation Scholarship. For the application to be considered, this form must be completed and accompany a letter of recommendation (see #5 below).

*Please return this form, no later than Monday, **March 6, 2023** to:*

Gwyneth's Gift Foundation Scholarship Program
2217 Princess Anne Street, Suite 101
Fredericksburg, VA 22401

Or online:

<https://www.gwynethsgift.org/our-programs/scholarship-application/>

1. In what capacity have you known the applicant?

2. How long have you known the applicant?

3. How well do you know the applicant? ___ Very Well ___ Fairly Well ___ Limited contact

4. Please rate the applicant from one to four on the following items:

Circle appropriate number for each (1 is below average - 4 is Exceptional, and NI is No Information)

- | | | | | |
|---|---|---|---|---|
| a. Applicant's determination to achieve his/her goals..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| b. Applicant's ability to work with others in a positive manner..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| c. Applicant demonstrates a capacity for leadership and role models those behaviors..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| d. Applicant's critical thinking skills..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| e. Applicant has a caring and accepting attitude that is evident in daily activities..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| f. Applicant's reliability..... | 1 | 2 | 3 | 4 |
| NI | | | | |
| g. Applicant's honesty/integrity..... | 1 | 2 | 3 | 4 |
| NI | | | | |

- h. Applicant's initiative..... 1 2 3 4
NI
- i. Applicant's commitment to community and service..... 1 2 3 4
NI

5. *Please attach a letter of recommendation on the applicant's behalf describing the student's character and why they should be considered for this scholarship.*

Signature Title

Date Phone Number