



Chartered November 13, 1997

TEACHER, COUNSELOR, COMMUNITY SERVICE SECTION

LETTER OF RECOMMENDATION

To be completed by each teacher, counselor, or community service provider submitting a letter of recommendation.

INSTRUCTIONS: Please complete all sections of this form in its entirety. The letter of recommendation must be on the letterhead of the school and/or organization and submitted with this form. Refer to the *Application Procedures* section of this document for additional information.

Name of Applicant (Last, First, Middle Initial)

Please respond to the questions in the spaces below:

1. How long have you known the applicant? _____
2. What is your relationship? _____
3. Please include comments that would be helpful in assessing the applicant.

Please email this recommendation before May 10th to educationpvsncnw@gmail.com so it can be attached to the student's application by May 10th.

Print Name and Title

Date

Organization Name: _____

Contact Number: _____

Email Address: _____

Signature

Thank you for assisting the Scholarship Committee in recommending the above-named applicant who is applying for a scholarship from NCNW Potomac Valley Section. We appreciate your candid assessment of the applicant.