

Education Together Foundation

APPLICATION FORM - Recommendation

Name of Scholarship Applicant _____

The person above is applying for a scholarship from the Education Together Foundation in Junction City, Oregon. Your comments about this applicant would be helpful in the selection process.

Please respond to the following:

What are the applicant's strong points?

Is the applicant capable of doing college level work, or qualified to pursue his/her vocational field?

Are his/her goals realistic?

Write one outstanding memory of this applicant.

Your name: _____

Your relationship to the applicant: _____

The length of time you have known this applicant: _____

Please mail the completed form to:
Scholarship Committee, Education Together Foundation, P.O. Box 523, Junction City, OR 97448