



IACRAO

Leadership and Service Scholarships

Faculty Recommendation

SECTION IV: FACULTY MEMBER / ACADEMIC ADVISOR / COUNSELOR RECOMMENDATION:

Submit this form or a signed statement on school letterhead to the scholarship applicant for inclusion in their application packet. Please type or print legibly.

Please evaluate this student as to his/her leadership and service activities, contributions, and personal character.

Student Name: _____

How long have you known this student? _____

In what capacity have you known this student? _____

Recommendation Statement:

I certify that the recommendation provided above is complete and accurate.

Name of Faculty/Advisor/Counselor

Signature of Faculty/Advisor/Counselor

Position Title

Name of College/University

Email Address

Phone

Date