

Kailua United Methodist Church Foundation
 Recommendation for Scholarship
 (FACULTY MEMBER)
Due by postmark date of April 30th

Directions: The applicant must ensure that a current faculty member submits THIS FORM by the deadline date. Other forms will not be accepted.

Applicant Name _____

Recommendation from _____ Title _____
Printed name

Educational Institution _____

1. How long and in what capacity have you known this applicant?

2. How would you rate this applicant's motivation and initiative in pursuing academic goals?

3. Please rate this applicant by making your selection in the applicable box in chart:

	Excellent	Very Good	Average	Below Average	Not Known
Leadership					
Creativity					
Work Ethic					
Enthusiasm					
Adaptability					
Maturity					
Ability to work well with others					
Communication skills					

4. Please provide specific examples of how this applicant has demonstrated the above qualities. (Please use back of sheet or attach a separate document)

Signed _____ Date _____

*Please mail original form to KUMC Foundation, ATTN: Scholarship Committee,
 1110 Kailua Road, Kailua HI 96734.*

Kailua United Methodist Church Foundation
 Recommendation for Scholarship
 (COMMUNITY MEMBER)
Due by postmark date of April 30th

Directions: This applicant must ensure that an adult community member who has known the applicant for at least five years submits THIS FORM by the deadline date. Other forms will not be accepted.

Applicant Name _____

Recommendation from _____
 Printed name

1. How long and in what capacity have you known this applicant?

2. How would you rate this applicant's motivation and initiative in pursuing academic goals?

3. Please rate this applicant by making your selection in the applicable box in chart:

	Excellent	Very Good	Average	Below Average	Not Known
Leadership					
Creativity					
Work Ethic					
Enthusiasm					
Adaptability					
Maturity					
Ability to work well with others					
Communication skills					

4. Please provide specific examples of how this applicant has demonstrated the above qualities. (Please use back of sheet or attach a separate document)

Signed _____ Date _____

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