



## UW-Waukesha Foundation Scholarship Application Personal Recommendation Form

For the Applicant:

Name of Applicant: (Please Print) \_\_\_\_\_

Applicant's Address: \_\_\_\_\_  
Street city state zip code

I request that \_\_\_\_\_ complete a recommendation for me.  
Recommender's Name (Please Print)

Under the provision of the Buckley Amendment: (Please check one)

- I waive my right to review this letter of recommendation.
- I retain my right to review this letter of recommendation.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### For the Recommender:

The above-named applicant is applying for a UW-Waukesha Foundation Scholarship. The Scholarship Committee would like your frank opinion of this candidate and would appreciate your thoughtful attention to this recommendation. If you believe you cannot adequately respond to all questions below, complete only those that you feel qualified to answer. Please be thorough, as your response is important to the review & selection process. Please answer these questions on a separate sheet of paper and return with this signed form by **4:30 p.m. Wednesday, February 15, 2018** to the address on the bottom of this page. Please do not use staples or paper clips. Thank you.

- How long and under what circumstances have you known this applicant?
- Your recommendation may address some or all of the following: the student's communication and leadership skills; commitment; level of responsibility; integrity; and potential. In what ways does the applicant distinguish himself or herself from peers? How is the applicant a positive role model? Cite specific instances, if possible, to illustrate your observation.

Signature of Recommender: \_\_\_\_\_ Date: \_\_\_\_\_

Recommender's Position/Title: \_\_\_\_\_

Please return this form & your recommendation by **4:30 p.m. February 15, 2018** to:

**Scholarship Committee/Solutions Center  
C/o Dan Geddes  
University of Wisconsin - Waukesha  
1500 N. University Drive  
Waukesha, Wisconsin 53188**