



FIRST COAST CHAPTER ICC ~ BOAF SCHOLARSHIP REFERENCE FORM

Applicant's Name:

Note: Please complete this form, filling in all of the required information, and then return it to the applicant for submittal with the application. The BOAF Scholarship Committee will hold comments in strict confidence.

Please indicate Type of Reference: ___ Faculty ___ Teacher ___ Personal ___ Professional

1. I have known the applicant for _____ years.

2. The applicant's general reputation and character are

3. I believe the applicant's scholastic ability to be: _____ fair _____ average _____ good
_____ excellent _____ superior

4. I believe the applicant's dedication to study to be: _____ fair _____ average _____
good _____ excellent _____ superior

5. I ___ would OR ___ would not recommend the applicant for a scholarship/grant because:

Individual Providing Reference

My profession is:

I am associated with _____

Name _____

Please print

Signature _____

Address _____

Telephone (_____) _____

Date _____