



Let justice roll down like waters,
 righteousness like a never-failing stream!
 ~ Amos 5:24

Trailblazer Student Scholarship Recommendation Form

Student Name _____ Date of Birth: _____

The above named student is applying for the NOAH Trailblazer Student Scholarship.
 Please complete the information below and return the form to the Scholarship Committee email address
 with the applicant's name listed on the subject line of the email.

NOAHSCHOLARSHIP@NoahNiagara.org

Name of Person Recommending: _____

Title/Department: _____

Email: _____ Phone: _____

How long have you known the applicant? _____

What capacity do you know the applicant? _____

How well do you know this applicant? _____

Based on your overall experience with students, how would you rate the applicant for each of the following characteristics? Please select the rating that best describes the applicant in each category. Select Not Observed (N/A) if you have not had an opportunity to evaluate the characteristic or have no basis for assessment.

	Not Observed (N/A)	Below Average	Average	Above Average	Excellent
Oral Communication					
Written Communication					
Leadership					
Integrity					
Concern for Others/Compassion					
Critical Thinking					
Ability to work with others					
Adaptability					
Initiative					

NOAH Trailblazer Scholarship Recommendation Form (Continued)

Student Name: _____

	Not Observed (N/A)	Below Average	Average	Above Average	Excellent
Organizational & Planning Skills					
Self Discipline					
Class Participation					
Open to Constructive Feedback					
Creativity and Imagination					
Specify a relevant quality of your choice.					
Specify a relevant quality of your choice.					

Recommendation for Scholarship:

I recommend this applicant.
 I am not able to recommend this applicant.

Please briefly provide any additional information below about the applicant, paying attention to :
 What differentiates this person from others, their capability for success at college,
 and any other details you feel are important.
 If needed, please include no more than one separate sheet of paper.

Recommender Signature: _____ Date: _____