



**2022-2023 STUDENT SCHOLARSHIP PROGRAM - RECOMMENDATION FORM**  
**APPLICATION DEADLINE: FRIDAY, APRIL 7, 2023**

As a key component to the success of our Scholarship Program, recipients of our scholarships are expected to be good students, responsible, reliable, hardworking, and well-rounded individuals capable of working well with others. In order to ensure these qualities, we require each applicant to submit a recommendation, which will be considered when her application is reviewed. This evaluation is a confidential document, which will help us determine the individual’s strengths and weaknesses. Please be sure to record some of your own personal comments, as this could be a determining factor in whether or not an individual will be awarded a scholarship. Your time and thoughts are greatly appreciated. **Please contact Laura Murphy at [lmurphy@cityofirvine.org](mailto:lmurphy@cityofirvine.org) or (949) 724-6887 with any questions.**

**Scholarship Applicant’s Name:** \_\_\_\_\_

**Please rate on a scale of 1 to 5:**      **1= Needs Improvement**      **2= Below Average**      **3= Average**  
**4= Above Average**                                      **5= Outstanding**

**1    2    3    4    5**

Ability to communicate written and orally
Attitude towards peers, coworkers, and/or professors/instructors
Ability to work well with others
Recognition of personal responsibilities
Demonstrates leadership ability
Models professional standards
Maintains a positive attitude
Demonstrates strong interpersonal, and organizational skills
Will represent WILS with dedication and determination

**Overall recommendation:**     RECOMMEND     DO NOT RECOMMEND

**Please use the space provided for additional comments (attach additional page if needed):**

\_\_\_\_\_  
\_\_\_\_\_

Rater’s Name: _____	Title: _____
School/Organization: _____	Email Address: _____
Rater’s Signature: _____	Date: _____
<b>Note: Recommendation Forms are to be submitted with applications by April 7, 2023.</b>	