

Geno Thomas Memorial Scholarship Fund

Recommendation Checklist Form 1

(Checklist should be completed by 1st recommender in addition to a one-page letter of recommendation)

Section 1: Applicant Information (To be completed by applicant)

| | | |
|---------------------------|---|---------------|
| Applicant's Name | | |
| Name of Recommender | | |
| Relationship to Applicant | <i>(Circle One): Professional or Personal</i> | Relationship: |
| Length of Acquaintance | | |

Section 2: Candidate Evaluation (To be completed by the recommender)

Directions: Please rate the applicant on the following criteria. Place an "X" along each line, rating the applicant from Excellent to Poor. If you do not know about a particular area, place an "X" under Unknown.

| I would compare the candidate with other individuals of the same level as follows: | Excellent | Good | Average | Poor | Unknown |
|--|-----------|------|---------|------|---------|
| Creativity | | | | | |
| Dependability | | | | | |
| Enthusiasm | | | | | |
| Initiative | | | | | |
| Leadership | | | | | |
| Ability | | | | | |
| Maturity | | | | | |
| Perseverance | | | | | |
| Responsibility | | | | | |
| Scholastic | | | | | |
| Potential | | | | | |

Overall Evaluation: **Excellent** **Good** **Average** **Poor**
(circle one)

You are encouraged to comment on the above ratings or on any other factors that you consider pertinent. Your ratings and comments will be held in confidence. **In addition, provide a one-page letter about the candidate.** Thank you for your time and cooperation from the Geno Thomas Memorial Scholarship Fund.

Signature of Recommender _____ Date _____
 Position _____
 Address _____

Applicants should provide references with an addressed/stamped envelope to:
 Geno Thomas Memorial Scholarship Fund
 Attention: Selection Committee
 PO Box 24262.
 Richmond, VA 23224