

COMMUNITY SERVICE RECOMMENDATION for
THE ROTARY DISTRICT 2015-16 SERVICE ABOVE SELF SCHOLARSHIP CANDIDATE

This evaluation should be sent to the Rotarian indicated below. The Sponsor Rotarian should forward this, along with your application, to the District Scholarship Chair.

SECTION I - To be completed by the applicant.

Name of applicant

Local Rotary club/sponsor Rotarian name and address:

Email:

I waive do not waive my right of access to the following information.

SECTION II - To be completed by a supervisor of the applicant's service work.

1. How long, and in what capacity have you known the applicant?

2. Describe the applicant's commitment to his/her service work.

3. How do you think the applicant's service work will impact his/her academic, vocational and/or personal goals?

4. How would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank

	Excellent	Very Good	Average	Below Average
Leadership Initiative				
Seriousness of Purpose				
Enthusiasm				
Public Speaking				
Maturity				
Adaptability				
Community Service				

5. Please cite specific examples of how the applicant has demonstrated the qualities listed in question 4.

6. Additional comments:

Name _____

Title or Position _____

Signed _____

Institution _____

Telephone _____ Fax _____

Email _____

Date _____