***Note to Applicant:*** *Fill out the portion with your name and which Rotary Club you want this Recommendation to be sent to if sent separately. Form is fillable with MSWord. Refer to the List of Rotary Clubs in the Application Packet*

# Recommendation for Scholarship
## From the Hawaii Rotary Youth Foundation

The applicant listed below must submit two recommendations for the Hawaii Rotary Youth Foundation Scholarship. Please return this completed form to the applicant to send in with his/her scholarship application. If you wish to submit this Recommendation privately, please send the completed form to the Hawaii Rotary Club that the applicant has listed below. Complete Application must be received by February 1, 2027.

If you prefer to send a written recommendation, please use a separate page listing answers to the questions listed below.

Name of Applicant

| | |
|---|---|
| First | Last |
| Applying to Rotary Club Listed Above | Email of Scholarship Chair |
| School/Institution | |
| Name of Person Making This Recommendation | Title |

I am a (check one) ☐ present faculty member or ☐ member of the community that has known this applicant for more than 2 years.

1. How well, how long, and in what capacity have you known this applicant?

2. How firm is the applicant's commitment to his/her proposed field of study if known.

3. In comparison with other students who you have known at comparable age, 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 | ☐ | ☐ | ☐ | ☐ |
| Public Speaking | ☐ | ☐ | ☐ | ☐ |
| Enthusiasm | ☐ | ☐ | ☐ | ☐ |
| Adaptability | ☐ | ☐ | ☐ | ☐ |
| Maturity | ☐ | ☐ | ☐ | ☐ |
| Emotional Stability | ☐ | ☐ | ☐ | ☐ |

4. Please cite some specific examples of how, in your association with the applicant, he/she has demonstrated the above qualities.

Signed:_____ Date:_____
*If emailed, print name as a signature*