Washington State Community College Scholarship Letter of Recommendation Form

Applicant - Complete top section	on only.				
Name	WSCC ID #				
Name of Reference					
What is your relationship with the reference?		Faculty/AdvisorSupervisor			
		Volun	iteer Coordina	tor	Other
*References CANNOT be family m	embers.				
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Reference - Please rate the app	SUPERIOR	ABOVE AVERAGE	AVERAGE	FAIR	UNKNOWN
INITIATIVE		7.17 2.17.102			
LEADERSHIP POTENTIAL				- 1	
DEPENDABILITY/RELIABILITY					
TEAMWORK		-	- 1		
RESPECT FOR OTHERS		-	$ \vdash$		
WORK ETHIC					
INTEGRITY					
POSITIVE ATTITUDE		- 14	닏	-	H
SERVICE TO					
SCHOOL/COMMUNITY		ш			
•					
Reference - Please provide additional information in support of the student you are recommending. Fee					
free to use the back of this form or attach a separate page.					

Reference Name:		_Date:
Phone #:	E-mail:	
Signature:		

Please return to: WSCC Financial Aid, 710 Colegate Dr., Marietta, OH 45750 or finaid@wscc.edu