

AAEDE Scholarship Recommendation Form 2018

Applicant's Name: \_\_\_\_\_  
High School ID Number: \_\_\_\_\_

**To Applicant:** Please give this form to your referral who can comment on your qualifications for this scholarship.

Under the Federal Family Educational Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation; however, those who write and assess recommendations may attach more significance to those documents if they know their comments will remain confidential. You may choose the option to waive your right to access these recommendations. Please check the appropriate statement to indicate your choice, and then sign your name below.

- I waive my right to review this recommendation.
- I do not waive my right to review this recommendation.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

**To Referral:** This recommendation form is NOT a substitute for the required letter of recommendation.

You may mail this recommendation form separate from the letter of recommendation; however, the review committee strongly encourages applicants to submit all requisite application materials at the same time.

Referral's Name \_\_\_\_\_  
Title: \_\_\_\_\_ Institution/School: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone number: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

1. I have known the applicant for \_\_\_\_\_ year(s) and \_\_\_\_\_ months.

2. I know the applicant:  very well  fairly well  slightly

4. Please rate the applicant on the following from high (5) to low (1): **5 4 3 2 1**

Oral communication skills \_\_\_\_\_  
Leadership ability \_\_\_\_\_  
Academic ability \_\_\_\_\_  
Written communication skills \_\_\_\_\_  
Takes initiative \_\_\_\_\_

5. Indicate the strength of your overall endorsement of the applicant:  
 Highly recommend  Recommend  Recommend with some reservation

6. Please add additional information which you believe pertinent to the selection of this applicant for the AAEDE Scholarship in your letter of recommendation.

**Referral's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PLEASE NOTE: The letter of recommendation must be issued in a sealed envelope with the referral's signature signed over the flap for authenticity and verification. Also, please print student's full name on the front of the envelope so that s/he may submit all requisite application materials at the same time. Recommendations not postmarked by deadline date will render student's application incomplete and inadmissible.

Thank you for completing the recommendation form. If you choose to send this form separately, please mail to:

AAEDE  
Attn: Scholarship Coordinator  
216 W. Garvey Ave. Unit E  
Monterey Park, CA 91754

**Deadline Date:**  
This Recommendation Form and your Letter of Recommendation must be postmarked by **Friday, June 8, 2018.**