

2009-2010 Letter of Recommendation

DEADLINE: April 17, 2009

Name of Applicant _____

Major _____ SSN _____ CIN _____

Phone _____ E-mail Address _____

The University Scholarship Committee appreciates your willingness to comment on the applicant's strengths and potential for success. We ask that you complete the chart below AND write a letter of recommendation responding to the following specific points of interest.

Please note that all letters must be submitted on letterhead or stationery. Explicit descriptions of academic strengths and weaknesses are more helpful to the candidate than routine praise.

1. Please describe how you know the applicant, how long, and how well.
2. Describe the applicant's academic strengths.
3. Include any information you are aware of concerning obstacles that may have been relevant to student access to educational opportunity.
4. How would you rate the student's motivation and initiative in pursuing academic, personal and career goals?
5. Indicate the student's leadership ability, either inside or outside of the classroom. Please provide specific examples.

Please rate the applicant in comparison with other students in the same class or academic program or other persons of comparable experience.

	Truly Exceptional	Excellent	Good	Average	Below Average	No Basis for Judgment
Academic ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Imagination and creativity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Character	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to focus or set goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please attach your separate letter of recommendation to this sheet and return it to the student or mail it directly to:

Attn: Scholarship Coordinator
Cal State L.A., Center for Financial Aid
5151 State University Drive, SA-124
Los Angeles, CA 90032

Name _____ Title _____

Institution _____

E-mail address _____ Phone _____