

Scholarship Recommendation Form

To be completed by a music professional with direct knowledge of applicant's abilities.

Applicant Name: _____

Please evaluate the applicant listed above by completing the following information:

Please describe the applicant's ability and personality (eg. Integrity, leadership, attitude, dependability, motivation, etc.)

Please describe any exceptional talents or skills which the applicant has exhibited.

Please write additional comments that will aid in assessing the applicant's qualifications: (use additional sheet if necessary)

Relationship to Applicant (instructor, etc.) _____

Signature _____ Date _____

Position: _____ School/Organization: _____

Phone: _____ Email: _____

Please return completed form in sealed envelope to scholarship applicant.

Scholarship applications (personal statement and reference form) must be received by March 30 in order to be considered. Mail to: AWSO, Executive Director, 1115 Hickory Street Onalaska, WI 54650