Thank you for providing a reference for the student named below, who is applying for a District Authority Scholarship in the indicated area of interest, for which they are required to demonstrate outstanding achievement.

Please complete the form and email to Ms. Christine Carrillo at ccarrillo@wvschools.ca. Enclosure of additional information on a separate sheet of paper is also encouraged.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area of Interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How long and in what capacity have you known the applicant?
2. Please rate and comment on the applicant’s quality of attributes where applicable:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DemonstratedAttribute/quality | No basis for judgement | BelowAverage | Average | Good | Very Good | Excellent(Top 10%) | Superior(Top 2%) | One of top few ever worked with |
| Communication Skills |  |  |  |  |  |  |  |  |
| Leadership |  |  |  |  |  |  |  |  |
| Collaboration |  |  |  |  |  |  |  |  |
| Effort/Determination/Energy |  |  |  |  |  |  |  |  |
| Initiative/Motivation |  |  |  |  |  |  |  |  |
| Ability to work Independently |  |  |  |  |  |  |  |  |
| Organization |  |  |  |  |  |  |  |  |
| Creativity |  |  |  |  |  |  |  |  |
| Concern for others |  |  |  |  |  |  |  |  |
| Honesty/Integrity |  |  |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |  |  |
| Responsibility |  |  |  |  |  |  |  |  |
| Reaction to setbacks |  |  |  |  |  |  |  |  |
| Overall performance/achievement in selected field |  |  |  |  |  |  |  |  |

1. Please comment on the applicant’s unique strengths as they pertain to their chosen area of achievement. Please include examples that illustrate the applicant’s strengths. Also please comment on any awards or special recognition the applicant has received that you have knowledge about.
2. Other comments you wish to make in support of this applicant.

Your Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_