

**Baldwin-Woodville Area Community Foundation
Scholarship Recommendation Form**

(This form is to be used for the required Community Member recommendation.)

Applicant: _____

Please print

Using the rating scale, please rank the applicant in each of the areas listed below.

	Outstanding		Average		Below Average	
	5	4	3	2	1	
Attendance/Reliability						
Attitude/Cooperation						
Communication Skills						
Leadership						
Motivation						
Potential for Success						
Work Habits/Organizational Skills						

What has this student done as an active member of the community?
Highlight significant community service.

Signature: _____

Please print name signed above

Relationship to Applicant: _____

Please return this completed form to: BWACF/Scholarship Application
PO BOX 352
Baldwin WI 54002

All forms must be postmarked by March 1st.