**San Mateo County 4-H Club Council Scholarship I Recommendation**

**Applicant:** Click here to enter text.

**Address:** Click here to enter text. **Phone:** Click here to enter text.

**To the Member:** Give a copy of this form to each person from whom you are requesting a written recommendation. Good choices would be a teacher, counselors, employers, or other non-family references.

**To the Person Making the Recommendation:** The information you supply, will be made a part of this applicant's scholarship consideration file. It will be held in strict confidence. Please give your frank, objective evaluation and indicate how well you know the applicant. You may wish to comment on the individual's maturity, integrity, citizenship, social adjustment, community involvement, leadership qualities, scholastic performance or vocational goals. If you feel you cannot write a recommendation for this individual, please so state and return this form immediately. Recommendations must be receive NOON on the date shown below. Please enter your recommendation in the space provided below and continue on the back if necessary. Thank you.

Click here to enter text.

**Signature:** **Date:** Click here to enter a date.

**Title:** Click here to enter text. **Place of Employment:** Click here to enter text.

*This sheet will be held in confidence between you and the judges and will not be returned to the subject concerned.*