



LETTER OF RECOMMENDATION FORM

To the Candidate: Complete following information (print or type) and forward it to recommender (professor, minister, volunteer supervisor or employer – not a relative). Let your recommender know that the Scholarships Office needs the completed form by June 1, 2017. Please do not wait until the last minute to do this. If your recommender does not want to give you the letter directly, ask him or her to email this completed form to scholarships@middlesexcc.edu.

Candidate’s Name (Last, First, Middle): _____

Intended Program of Study: _____

Name of Recommender: _____

To the Recommender:

We would appreciate your opinion of this applicant’s potential for success at Middlesex County College. Please tell us in what capacity you have known the candidate. **Complete this form and attach a letter of recommendation** that can include specific statements on such qualities as character, personality and work ability, as relevant. Your letter will be very helpful to scholarship reviewers as they rank the applications.

In addition, please rate the candidate’s overall potential using the chart below. We pay careful attention to your judgment and are grateful for your assistance.

Below Average	Average	Good	Excellent	Outstanding	Insufficient Opportunity to Observe

Recommender Signature: _____ Date: _____

Relationship to candidate (please check):

- Professor
 Employer
 Volunteer Supervisor
 Minister
 Other

If applicable, approximately how many hours does the candidate volunteer per week? _____

Position: _____ Institution: _____

Address: _____

Phone: _____ Email: _____

Candidate: Please save this completed form to your desktop or computer file and then attach it to your AwardSpring application.