

2016-2017 AMERICAN BAPTIST WOMEN OF WISCONSIN
CHURCH LEADERS' REFERENCE FORM FOR SCHOLARSHIP AID

CONFIDENTIAL

Dear _____,

_____ has applied for scholarship assistance from the American Baptist Women of Wisconsin. We especially value the help of our pastors in making this decision.

I have known the applicant for _____ years.

She has been a member of this church since _____.

What role does the applicant play in the activities of the church?

_____.

In what other ways has she participated in the life of the church?

_____.

Please rate the applicant in relation to other people in the following areas:

<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Weak</u>	<u>No Judgment</u>
Industry & Initiative:	_____	_____	_____	_____
Sense of Responsibility:	_____	_____	_____	_____
Emotional Stability:	_____	_____	_____	_____
Religious Sensitivity:	_____	_____	_____	_____
Local Church Contribution:	_____	_____	_____	_____
Potential for Christian Leadership:	_____	_____	_____	_____

Please add other comments you wish to make about the applicant.

_____.

Do you personally recommend the applicant for scholarship aid? _____

Signature: _____

Church: _____

Date: _____