



Mendocino College

2017-2018 Scholarship Application

PLEASE NOTE: *One Recommendation MUST BE from an Instructor/Professor/Teacher/Faculty member.*
 Application filing period: 1/2/17 thru 3/1/17 by 4:00 p.m.

Scholarship applicant fills out Part 1

PART 1 - APPLICANT INFORMATION <i>(Please type or print.)</i>		
Last Name _____	First Name _____	Middle Initial _____
Mendocino College Student ID: _____	Phone Number _____	Date _____

Evaluator fills out Part 2 & 3.

PART 2 - EVALUATOR'S INFORMATION <i>(Please type or print.)</i>		
Instructor/Evaluator's Name (Please PRINT) _____	Relationship to Applicant _____	Daytime Telephone _____

EVALUATOR: *The Scholarship selection committees appreciate and depend on your careful appraisal of the above-named Applicant's potential. Your judgment about their potential in his/her stated major and/or career, as well as his/her personal characteristics, is especially important. Your recommendation should include as much information as possible. Please note any unusual circumstances in the comments section of this form. Attach a separate sheet if more space is needed—please DO NOT write on the reverse side of this form.*

PART 3 - RATING <i>(Please select one in each category)</i>						
Scholarship:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Unable to observe
Potential in Career:	<input type="checkbox"/> Outstanding	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Unable to observe

COMMENTS: *All information is confidential. Your comments about the applicant's scholarship, leadership, attitude, determination, ambition, financial need, etc. will be most helpful. You can return this completed form to the Applicant or, if you prefer, to the Scholarship Coordinator (see name and address below).*

 Evaluator's Signature

 Date: