

Letter of Recommendation Form
for
Central Union Church Women's League Scholarship/Grant

APPLICANT'S NAME: _____
(Last) (First) (Middle)

INFORMATION TO THE PERSON WRITING THE SUPPORT LETTER:

This letter of recommendation/support must be received by the Scholarship Committee by **February 29, 2016** in order for the applicant to be considered. **Please note that ONLY the FIRST 50 COMPLETED APPLICATION PACKETS WILL BE CONSIDERED.**

Your comments regarding the applicant named above will be of great value to us. Please be as **specific** as possible. We would appreciate your insights into areas such as the applicant's scholastic potential, character, motivation, financial need, and service to the community. In addition, **please indicate how long, and in what capacity you have known the applicant.** A letter of recommendation from a church leader for an application to the Ruth C. Scudder Scholarship should identify the applicant's potential future service to the community and Christian religious interest. This is not a requirement for the Kenneth O. and Doris A. Rewick Educational Aid Grant.

Mail directly to: Chairperson, Scholarship Committee
Women's League, Central Union Church
1660 S. Beretania Street
Honolulu, Hawaii 96826

Date: _____

Comments: (Please use the reverse side of this sheet or attach additional sheets as necessary. Please write applicant's full name on the upper right-hand corner of each additional sheet).

Name (please print): _____ Signature: _____

Title and Affiliation to Applicant: _____

Address: _____

City: _____ State/Country: _____ Zip Code: _____

Telephone: _____ Home [] Business [] Cell []

E-mail: _____