

Teacher Scholarship/Bursary Recommendation Form

TO BE COMPLETED BY THE APPLICANT: Please complete this section before giving to a referee of your choice						
Last Name	First Name					
Teacher Name:						

Teaching Subject:

Please check the appropriate box for each student in the following areas as follows:

	Excellent	Good	Average	Needs Improvement	Not ready at this time
Academic Achievement					
Work Ethic					
School Activities					
Volunteer/ Community Service					
Leadership					
Citizenship					

Briefly describe your	history and	relationship	to the applicant
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Please comment on the student's readiness for Post-Secondary Learning

Describe the student's strengths

Other comments

Teacher Signature

Date