

## **Application for Student Scholarships FACULTY RECOMMENDATION FORM**

Name of applica	nnt:					
How long and in	what capacity h	ave you known	the applicant?			
	ıld you recommer			-		
Please select a n	umber below, 1=	lowest recomn	iendation, 5 = f	nighest		
1	2	3	4	5		
Please explain t	he basis of your r	anking				
Is there a partic	ular area you thin	k student is be	st suited (eg. ei	nvironmental scie	nce)? Why?	
Additional comm	ments relevant to	this student's	annlication			
Additional com	nents relevant to	tilis studelit s	аррисаціон			
Faculty name (p	lease print):					<u>—</u>
Faculty signatur	e:					
						<del></del>
Date:				_		

Faculty, thank you for taking the time to complete this form and for supporting this student's application. Please return the completed form directly to Holly Bradham via email to <a href="Holly.Bradham@usca.edu">Holly.Bradham@usca.edu</a>.