



# Rochester Community Schools Foundation Scholarship Program



One appraisal must be completed by a school counselor, teacher, coach, administrator or a non-family member who knows your qualifications relating to the scholarship(s) for which you are applying.

Applicant Name: \_\_\_\_\_

High School: \_\_\_\_\_ Appraiser's Name: \_\_\_\_\_

Scholarships are awarded based on one or more criteria. Please indicate the criteria that apply to the student you are appraising. (check all that apply)

**Academics**

**Artistic activities**

**Athletics**

**Career choice**

**Church activities**

**Community Service**

**Drama**

**Financial need**

**Leadership**

**Other activities**

**Overcoming obstacles**

**Work ethic**

**TO THE APPRAISER:** Your appraisal is very important to completing the scholarship packet. Please give it your immediate attention. By receiving this form, the student is authorizing you to release any information that would help in reviewing his/her application. The scholarship deadline is **January 12, 2020**. All materials must be received on or before this date for consideration.

**Please upload this form at [www.rochesterschoolsfoundation.org](http://www.rochesterschoolsfoundation.org) under application packet "Confidential Appraisal Upload" or give back to the student so they can upload and complete application packet. Call 248-726-3190 with questions.**

1. What is your relationship with the applicant?

Academic      Personal      Employer      Other (specify) \_\_\_\_\_

2. How long have you been acquainted with the applicant?

All his/her life      5-10 years      3-5 years      1-3 years

3. How well do you know the applicant?

Extremely well      Very well      Moderately well      Not well

4. Do you think the applicant has the ability and determination to complete his/her educational objectives?

Yes      No      Don't know

5. Please write a letter of recommendation on the following page.

**CERTIFICATION:** *By typing your name below, you certify that all of the information on this form is true and complete to the best of your knowledge.*

Appraiser's Name \_\_\_\_\_

Title \_\_\_\_\_ School, Business, etc. \_\_\_\_\_

Daytime Phone \_\_\_\_\_

**We ask that you complete and save this document on your desktop and along with your letter of recommendation (see next page), upload to [www.rochesterschoolsfoundation.org](http://www.rochesterschoolsfoundation.org).**

Please write a letter of recommendation below or upload a letter that includes personal traits such as cooperation, perseverance, character, work ethics, ability to set realistic goals, responsibility, commitment to educational goals and commitment to community.



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