Scholarship Program at Korean Presbyterian Church of Metro Detroit

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email Address Telephone Number Year (1, 2, 3, 4, Applicant Name (Last, First)

 G-Master,

 G-Doctorate)

**RECOMMENDATION**

The person below is applying for the Scholarship Program at Korean Presbyterian Church of Metro Detroit. We greatly appreciate your honest feedback on the character and Christian faith of the applicant. Please return the completed reference form in a sealed and signed envelop to the applicant. The applicant is responsible for gathering and submitting all application materials in one complete package.

**Applicant Information** (to be completed by applicant – in addition, please complete the top portion.)

Name: School/Year:

Academic Field and Degree:

Telephone: Email Address:

**Reference Information**

Name: Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you known the applicant and in what capacity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please rate the applicant in comparison with other dedicated Christian leaders.**

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| --- | --- | --- | --- | --- | --- |
|  | Excellent | Good | Average | Fair/Poor | Don’t know/NA |
| Christian Character |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Academic Commitments |  |  |  |  |  |
| Time Management |  |  |  |  |  |
| Creativity |  |  |  |  |  |
| Communication Skills |  |  |  |  |  |

**Describe any special attributes or circumstances of the applicant that you would like the KPCMD Scholarship committee to consider. (Attach extra sheet)**

Signature Date