

Mathematics, Computer and Information Sciences ALUMNI BOOK SCHOLARSHIP REFERENCE FORM

Name of Applicant _____
First
Middle
Last

- I agree to waive access to this reference form.
 (If you waive access, this means you agree that you will not be allowed access to this reference form once it is submitted.)
- I do not agree to waive access to this statement.

Signature of Applicant _____ Date _____

The applicant named above is asking that you provide a reference for him/her. The student is applying for an MCIS Alumni Book Scholarship at MVSU. The Book Scholarship is open to all Mathematics and Computer Science Majors.

How long have you known the applicant and in what capacity? _____

Please rate the applicant in each of the following areas.

	Poor	Below Average	Average	Good	Excellent
Academic Capabilities	1	2	3	4	5
Writing Skills	1	2	3	4	5
Communication Skills	1	2	3	4	5
Analytical Skills	1	2	3	4	5
Initiative	1	2	3	4	5
Dependability	1	2	3	4	5
Adaptability	1	2	3	4	5
Appearance	1	2	3	4	5
Ability to work with others	1	2	3	4	5
Emotional Stability	1	2	3	4	5

PROVIDE ADDITIONAL COMMENTS ON A SEPARATE SHEET IF NEEDED.

Name of Reference _____ Email _____

Job Title _____ Phone Number _____

Mailing Address _____
Street/Box
City
State
Zip

Signature _____ Date _____