

KRUM PTO SCHOLARSHIP LETTER OF RECOMMENDATION

*** Please include three Letters of Recommendation with your application. ***

Student's Name: _____

To the student: This form is to be completed by current or past instructors and/or employers. Letters from friends, relatives or other students will not be accepted.

To the Evaluator: Please complete this form. You may use the back of this page and/or attach additional pages if necessary. This form will become part of an open file available to the student. The reference included in the file will be considered non-confidential.

Please rate the student in each of the following categories:

Category	Superior	Above Average	Average	Below Average
Academic Achievement				
Self-Discipline				
Strength of Character				
Written and/or Oral Expression				
Creativity				
Overall Evaluation				

What is your relationship to this student? _____

Please include any additional comments regarding this student or attach a letter of recommendation to this page.
