

SCHOLARSHIP RECOMMENDATION FORM

SOUTHEASTERN MICHIGAN NETWORK OF THE CALVIN ALUMNI ASSOCIATION

Your help in providing an evaluation of the applicant for this scholarship is valuable in making the award decisions. Please type your comments on this form or attach them to this form. Thank you for your time and effort preparing it. You can find an electronic copy of this form at:
<http://www.calvin.edu/alumni/about/scholarships/semich-rec.doc> or
<http://www.calvin.edu/alumni/about/scholarships/semich-rec.pdf>

Applicants Name: _____

Personal/Christian Character:

Intellectual Ability:

In what ways will this student contribute to the mission and community of Calvin College?

Your signature: _____

Please email (preferred) or return this form (postmarked) by February 1, 2012 to:

Ross Weener ■ 3411 Burbank Dr. ■ Ann Arbor, MI 48105

rossanddebweener@yahoo.com * 734-945-0683