

THE ADRIAN GONSOLIN SCHOLARSHIP

SCHOOL FACULTY / ADMINISTRATION RECOMMENDATION

Please complete this portion of the form and give the form to a **current teacher or administrator at your high school**. This recommendation is **confidential** and should be mailed, or sent as an email attachment directly to Good Shepherd Catholic Church by the person completing the form. Contact information is provided below.

Name of Student: _____ **Current Grade:** _____

I waive all my rights to read the confidential recommendation for the student listed above.

_____ (Student's signature) _____ (date)

_____ (Parent/Guardian signature if student is under 18 years old) _____ (date)

This recommendation will assist the Adrian Gonsolin Scholarship Committee in assessing qualifications for the Adrian Gonsolin Scholarship. Your candid responses when evaluating this student are greatly appreciated and will be held in confidence and used for scholarship purposes only. *(Before sending, please photocopy for your file in case of loss during transit.)*

What is your relationship to the student? _____

How long have you known the student? _____

What is your most recent interaction with student? _____

Does the applicant interact well with: peers? _____ teachers? _____ adults/persons of authority? _____

If no, please elaborate: _____

Is the applicant capable of handling challenging academic demands? _____

In what ways is the applicant active in his/her community? _____

Briefly describe the student's integrity, service to others and general enthusiasm? _____

What more would you like to tell us about this applicant? _____

(Please print)

Name: _____ Home Phone: _____

(area code)

Address: _____ Work Phone: _____

(street or PO box)

(area code)

(city)

(state)

(zip)

E-mail: _____

May we contact you for further information? _____ Yes _____ No

(signature)

(date)

Please return form to:

Good Shepherd Catholic Church

Attention: The Adrian Gonsolin Scholarship Committee

2021 Decherd Blvd., Decherd, TN 37324

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