

Missouri District Endowment Fund

Personal Reference for:

Student's Name: _____

This reference must be submitted to the Missouri District Endowment Committee **by July 1st**. Please be honest in the evaluation and include all details that will help guide the selection committee to the best choice.

Please use the enclosed envelope to seal and mail this recommendation to:

**Missouri District Endowment Committee
PO Box 804
St. Peters, MO 63376**

Your Name: _____ Relationship to Student: _____

Your Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

What qualities have you witnessed in this student that makes him/her scholarship worthy? _____

What would you consider to be the student's greatest strength? _____

Weakness? _____

Any other information that will help the selection committee in their decision: _____

I have verified that all the above information is true and would recommend the above student for this scholarship:

Would Not Recommend

Would Strongly Recommend

1 2 3 4 5 6 7 8 9 10

Signed: _____ Date: ____/____/____.