

SOUTHERN UNION PERFORMING ARTS
SCHOLARSHIP RECOMMENDATION FORM

TO THE STUDENT:

Please complete the information below, sign, and give this form to your high school counselor, principal, and/or your music, dance, or theatre instructor.

Name _____ Social Security Number _____

Address _____

City, State, Zip _____

Student's Signature _____ Date _____

TO THE COUNSELOR/PRINCIPAL/INSTRUCTOR:

The student above has requested an audition/interview for a performing arts scholarship to Southern Union State Community College. Please complete the information requested below and return this form to the student. Thank you.

1. Has this student ever been under academic or social discipline? Yes ___ No ___ If yes, please explain _____

2. My recommendation of this student's **academic ability** can be characterized as:

Enthusiastic ___ Strong ___ Moderate ___ With reservations ___ I do not recommend ___

3. My recommendation of this student's **character** can be characterized as:

Enthusiastic ___ Strong ___ Moderate ___ With reservations ___ I do not recommend ___

4. My recommendation of this student's **dependability** can be characterized as:

Enthusiastic ___ Strong ___ Moderate ___ With reservations ___ I do not recommend ___

Signature _____ Date _____

Name _____ Position _____

School _____

Address _____

Daytime Telephone _____ Email Address _____