



Name of Applicant: _____

VAEOPP SCHOLARSHIP RECOMMENDATION FORM

The Virginia Association of Educational Opportunity Program Personnel (VAEOPP) is a professional development and advocacy association made up of TRIO program personnel from throughout the Commonwealth of Virginia. We promote equal educational access and opportunity for low-income and first generation students served by TRIO programs.

Each year VAEOPP selects eight students to receive scholarships through the organization. As such, your candid evaluation of the applicant requesting your recommendation would be of assistance to the VAEOPP Scholarship Committee in selecting worthy candidates. Thank you!

Please write or type your responses legibly.

Evaluator's Name: _____

Position/Title: _____

Organization/Affiliation: _____

Preferred Email: _____

How long and in what capacity have you known the applicant?

To the best of your ability, please assess the applicant below. Please mark an "X" in the box that best represents your response.

Academic Ratings:	Excellent	Very Good	Good	Fair	Poor
Motivation					
Initiative					
Creativity					
Work Ethic					
Academic Achievement					

Character Ratings:	Excellent	Very Good	Good	Fair	Poor
Leadership					
Self-Confidence					
Maturity (Responsibility)					
Response to Feedback					
Willingness to Collaborate					



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Engagement Ratings:	Excellent	Very Good	Good	Fair	Poor
Extracurricular Activities					
Community Involvement					

Why do you believe this applicant deserves this scholarship?

Please mark, with an "X", the option that best reflects your overall recommendation of this applicant.

Highly Recommend Moderately Recommend Reluctantly Recommend Do Not Recommend

Signature: _____

Date: _____

Dear Recommender,

Please return this form to the applicant in a sealed envelope with your signature over the seal.

Thank you,

VAEOPP Scholarship Committee