



California

Los Angeles County Chapter

Scholarship Recommendation Form (2 required)
2017-2018 Academic Year

Please provide this to the student in a sealed envelope to be included in their scholarship package.
Please do not mail to ACEC separately.

Name of Student \_\_\_\_\_

Name of School \_\_\_\_\_

Degree Expected \_\_\_\_\_ Date Expected \_\_\_\_\_

Your name \_\_\_\_\_

Title \_\_\_\_\_

You are (check one):

Engineering Professor Consulting Engineer Land Surveyor

Address \_\_\_\_\_

How long, how well, and in what capacity have you known the applicant? \_\_\_\_\_

In September 2015, the student will be \_\_\_\_\_ level in \_\_\_\_\_ field of study.

(Sophomore/Junior/Senior/MS/PhD)

Please rate the student from 1 (lowest) to 4 (highest) in the following categories:

Table with 2 columns: Category, Rating, and Use space below to explain your answers. Attach additional sheet, if necessary. Rows include Academic potential, Academic performance, Cooperation, Leadership, Initiative, Industrious, Dependability, Courtesy, Maturity, Self-control, and Potential as a PE or LS.

Signature \_\_\_\_\_ Date \_\_\_\_\_