

DEGREE SPONSORSHIP REFERENCE

To Be Completed by a School Official or Organization Advisor

| Students Name: | | | | | | |
|--|---------|--|---|-------------------------------|---|---|
| This is to certify that the above-named student is expected to graduate during the | | | | | | |
| school year from (school name) | | | | | | |
| have known this student for approximately years through How do you know the student? | | | | | tudent? | |
| Please rate the applicant as candidly as possible. Circle the correct number. | | | | | | |
| 1 – Excellent 2 – Good 3 – Average 4 – Needs Work 5 – Can't Comment/Not Observed | | | | | | |
| 1. Individual Performance a. Completes work on time b. Completes own work independently, with few/no prompts c. Work is adequately neat and organized d. Puts forth good effort in completing work as instructed 2. Working with Others a. Works well in teams b. Equally contributes to group projects c. Assumes leadership and responsibility when appropriate 3. Mechanical Inclination a. Expresses an interest in mechanical subjects b. Demonstrates natural abilities/potential in mechanical subjects c. Conducts self in a safety-conscious manner 4.Self-Discipline a. Follows instruction/rules b. Speaks up and participates in a constructive manner c. Is respectful to authority figures d. Has acceptable attendance | | 1 1 1 1 1 1 1 1 1 1 | 2222222222 | 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | 4 4 4 4 4 4 4 4 4 | 5 |
| Please tell us why you feel this applicant should be considered for this degree sponsorship and scholarship opportunity. You may wish to expand on the applicant's academic strengths as listed above. Also include any other information you may want us to know about the applicant. | | | | | | |
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| Name: | E-mail: | | | | | |
| Signature: | Date: | | | | | |