



2021 Rollie Hoggood Future Teachers Scholarship Award

REFERENCE & RATING FORM

NAME OF SCHOLARSHIP APPLICANT

NAME

TITLE (Teacher/Instructor/Counselor/ Advisor/Employer/Supervisor)

PHONE

The person named above has applied for a scholarship through a program of the AFT Michigan. This person is requesting that you provide us with a reference to be used in processing this application.

We must receive your reference by June 30, 2021 in order for it to be valid. Please make note of the deadline.

Pease rank the applicant's skills based on a 1 to 5 scale. 1 = Lowest - 5 = Highest

Table with 5 columns (1-5) and 5 rows (LEADERSHIP QUALITIES, SELF CONFIDENCE, RELIABILITY, SOCIAL SKILLS & RELATIONSHIPS WITH PEERS, INTEGRITY)

How do you know this applicant? _____

Please provide us with a few sentences, which would describe the applicant.

May we call you if the applicant is a finalist? _____

School/Worksite _____

Address _____

Signature _____ Date _____

THIS SHEET MUST ACCOMPANY THE APPLICATION