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Student Name:_____
High School:_____

THE GERBER FOUNDATION SCHOLARSHIPS
RECOMMENDATION ON SCHOLARSHIP APPLICANT

Applicant: Please print your name on the line indicated above and take one to a teacher or non-family member of your choice, along with an envelope addressed to The Gerber Foundation. This individual will preferably be a faculty member or individual active in your chosen field or an adult that knows you well.

Teacher/Non-Family Member: I have entered The Gerber Foundation scholarship competition. Information about my academic experience, relevant extracurricular activities and personal standards (honesty, responsibility, trustworthiness, good citizenship, teamwork) is needed by the Selection Committee to determine who will receive a scholarship award. Please help me by completing and forwarding this form in the envelope attached for your use. The deadline for this information is February 28. Thank you.

Use space below to provide information or provide a typed letter, which would help our Scholarship Selection Committee evaluate this applicant's qualifications to receive a scholarship. Include information such as that described above. Please provide specific examples. Your comments will be held in strict confidence.

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_____

DATE_____ By:_____
NAME

RELATIONSHIP TO APPLICANT:_____

Please return form to The Gerber Foundation, Scholarship Program, 4747 W 48th St., Suite 153, Fremont, MI 49412-8119 by **February 28**.