York College Foundation Scholarship

Recommendation Form

(Please print clearly or type)

Two (2) recommendation forms are required from (2) different faculty members:
Students complete top portion and recommenders complete bottom portion of form.

For Entering Freshman (First Year) and Transfer Students: Recommendations must be from your previous school. Please inform recommender that it is mandatory that this form be completed and returned with an attached (signed and dated) letter that answers the questions below on your behalf.

For York Continuing (Current) Students: York College Faculty members must complete this form however may vary on criteria required for each scholarship. Recommendation letters are optional, however may increase value of application.

To Be Completed by Student:
State your level of education when applying: (Please choose one)
_____ Entering Freshman (First-year) student _____ Entering Transfer _____ Continuing (Current) Student

CUNY Empl ID#: ________________________

Name of Student: _________________________________________________________________________

Primary Phone Number: ( )-________-________ Alternative Phone Number: ( )-__________-_________

Please choose one of the Following:
_____ I waive my right to read this letter of Recommendation.
_____ I do not waive my right to read this letter of recommendation.

X______________________________________ ____________________________

Applicant Signature Date

Name of Recommender: ______________________________________________________________________

Title: _________________________________________________________________________________

Name of School: _________________________________________________________________________

Mailing Address of School: _________________________________________________________________

Email: _________________________________________________________________________________

Phone Number: ( )-____________-___________

Submit before Deadline of Academic Semester. (Late applications will not be accepted)

To be completed by the Recommender:
This individual is applying for a York College Foundation Scholarship. Your comments will be an important part of the selection process. Keep in mind that the applicant cannot be considered for a scholarship award until your recommendation is on file:

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

- Be as specific as possible about the applicant’s academic performance:

- If appropriate, please mention the applicant’s motivation and initiative; ability to complete and carry through projects and goals:

If you would like to write a letter on behalf of the applicant, please write on official letterhead from the high school or college) and attach the written letter signed and dated with this form in a sealed envelope, signed across the seal, to the student or to the Scholarship Office by interoffice mail, by mail before deadline, or have documents scanned and emailed to:
York College, CUNY/Institutional Advancement, Room: 2H03
Attn: Scholarships Department
94-20 Guy R. Brewer Blvd. /Jamaica, NY 11451
Email: Scholarships@york.cuny.edu

X_________________________________________ ___________________________________

Recommender Signature Date

For more information on other scholarships visit our website:  www.York.cuny.edu/scholarships

May/2014