



To the Recommending Official: If the student waives his or her right, the recommendation will be held in confidence from the student and all other parties except as used by the Applications Review and Recommendations Committee and the Officers and the Board of Trustees of The Christian Scholarship Foundation.

If the student does not waive his or her right, or if the student does not sign either statement on the preceding page, the student will be permitted to see this form on request. If you prefer to write a letter, please attach it to this form. Your thoughtfulness in providing this information is appreciated. Please mail the completed form directly to: Executive Director, The Christian Scholarship Foundation, Inc., 3749 Midvale Road, Tucker, GA 30084.

In what capacity and how long have you known the applicant?

Please provide a statement evaluating the applicant's intellectual ability, academic performance, and promise as a scholar in the service of the church:

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Institution: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please send completed recommendation to: Executive Director, The Christian Scholarship Foundation, Inc., 668 Clifton Rd, N.E., Atlanta, GA 30307-1789. Deadline for receipt of letters: January 15, each year.