

First Lutheran Church Scholarships

LETTER OF RECOMMENDATION

Student – please complete Section A. Provide this form to a person who knows you well. This person should not be your pastor, a family member or relative.

Section B. Instructions for individual completing this recommendation - Please return the recommendation directly to First Lutheran Scholarship Program, 116 Inner Drive, Le Sueur, MN 56058. Please let the applicant know that your recommendation has been submitted.

Section A

Applicant's Last Name _____

First Name _____

Telephone number _____

Section B

Name of Reference _____

City _____ State _____ Zip Code _____

Relationship to Applicant _____

Length of Acquaintance _____

On behalf of the scholarship applicant, please provide a statement concerning the characteristics of the applicant, giving attention to: initiative, integrity, judgment, leadership, reliability and dependability, and other unique personal qualities.

All information submitted will be held in confidence and reviewed only by the First Lutheran Scholarship Team