

**ETA ETA LAMBDA CHAPTER of ALPHA PHI ALPHA FRATERNITY, Inc.  
2019 YOUNG MEN'S SCHOLARSHIP**

**PERSONAL REFERENCE**

1. This recommendation is for \_\_\_\_\_.  
(Applicant's Name)

2. Please give your evaluation of the applicant's abilities and strengths as a student (or employee) and as a prospective college student. (*Attach a separate page, if necessary.*)

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3. Do you know of any special circumstances concerning the applicant's home, school or community life, which should be considered when evaluating this scholarship application?

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4. Please evaluate the Applicant's capabilities in the following character traits: (mark rating with "X")

	Exceptional	Above Average	Average	Below Average
Reliability	_____	_____	_____	_____
Social Maturity	_____	_____	_____	_____
Emotional Stability	_____	_____	_____	_____
Personal Appearance	_____	_____	_____	_____
Personal Judgment	_____	_____	_____	_____
Initiative	_____	_____	_____	_____

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Address \_\_\_\_\_

Official Position \_\_\_\_\_

\*\* Please return the completed form in a sealed envelope to the applicant not later than March 8, 2019 to allow time for delivery to the Alpha Phi Alpha Fraternity (Scholarship Committee) before the Application Deadline Date, **Friday, March 22, 2019**.