**Methodist Orphanage/Methodist Home for Children Alumni Association**

BRG Scholarship

REFERENCE FORM

NAME OF APPLICANT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Directions: The above applicant has applied for a **HIGHER EDUCATION** scholarship through the MO/MHC Alumni Association. Your candid evaluation of this individual as a potential scholarship recipient is appreciated. Your evaluation is confidential. Please respond to the items below based on your knowledge of the applicant and use N/A for any items of which you do not have knowledge. Thank you for your time! If applicant is in college, please provide references from that school. THIS REFERENCE FORM IS THE ONLY ONE THAT WILL BE ACCEPTED in applying for the BRG Scholarship (Although ADDITIONAL MATERIALS WILL BE ACCEPTED, THEY WILL NOT SERVE TO REPLACE THIS FORM). TWO REFERENCES MUST BE SUBMITTED ON BEHALF OF THE APPLICANT BY THE DEADLINE.

**Commitment to Public Service** LOW **1 2 3 4 5 HIGH N/A**

**Character**

Work ethic **1 2 3 4 5 N/A**

Self-Reliance/Confidence **1 2 3 4 5 N/A**

Stability/Maturity **1 2 3 4 5 N/A**

Adaptability/Resourcefulness **1 2 3 4 5 N/A**

**Drive and Purpose**  **1 2 3 4 5 N/A**

**Creativity**  **1 2 3 4 5 N/A**

**Desire to further education 1 2 3 4 5 N/A**

and life skills

**Life Shaping Events**  **1 2 3 4 5 N/A**

**Leadership Experience 1 2 3 4 5 N/A**

**and Potential**

**Extra-Curricular Activities** **1 2 3 4 5 N/A**

*Comment: Please provide comments on all scores less than a 5 from above. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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Signature

Your Name (Please Print) Name of School Your Position

Date School Phone Number School email address

Completed reference must be postmarked by **(February 26, 2024),** and mailed to: Ms. Jean Brown at: 1884 Andrews Store Road Pittsboro, NC 27312 *or* Email: jbrown5243@aol.com