



**Scholarship Committee
Applicant Recommendation/
Appraisal**

APPLICANT

Name _____ Social Security Number _____

I waive the right to inspect this appraisal when completed and understand it will remain confidential.

I do not waive my right to review this document.

Applicant Signature _____

APPRAISER | The above named applicant is applying for a scholarship from the Michigan Equine Scholarship Fund. The number of available scholarships and the amount of funds are limited, so we seek to help the most deserving students continue toward Bachelor's degrees.

Appraiser's Name _____ Institution _____

Address _____ Phone _____

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

2. Please evaluate the applicant in the following categories:

	Excellent	Very Good	Average	Fair	Poor	Unobserved
Intellectual Curiosity						
Self-discipline						
Persistence						
Motivation for Study						
Ability to Express Self in Writing						
Ability to Express Self in Speech						

3. Do you believe this applicant has the ability, desire and determination to complete the requirements for an Associate's or Bachelor's degree or to complete the Trade program?

Yes No

Comments: _____

4. Please attach a separate sheet if there are further statements you wish to make regarding this applicant's unique qualifications, behavioral tendencies, or limitations.

Signature _____ Date _____

Please mail directly to:
Trustees, Michigan Equine Scholarship Fund
3963 Catawba Street, PO Box 6876, Toledo, Ohio 43612

For more information call:
866.432.1966 or 734.432.1966