Association of Information Technology Professionals (AITP) Omaha Chapter

In partnership with AIM

Scholarship Recommendation (FORM B)

Student Name:

Student Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recommender Name:

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Please select the ratings for the items below that  best describes the applicant.** | **No Basis** | **Fair** | **Good** | **Excellent** |
| --- | --- | --- | --- | --- |
| Creativity, Original Thought |  |  |  |  |
| Independence, Initiative |  |  |  |  |
| Effective Communication |  |  |  |  |
| Discipline, Work Habits |  |  |  |  |
| Leadership |  |  |  |  |
| Team Player |  |  |  |  |
| Responsible |  |  |  |  |

Additional Comments (attach a letter if desired):

Sign or type your signature below:

Recommender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Send the completed recommendation to:**  Melissa Flannery  Bellevue University  1000 Galvin Road South  Bellevue, NE 68005 | Or e-mail to: [flannery@bellevue.edu](mailto:flannery@bellevue.edu) |