



**Georgia Compensatory Educational Leaders (GCEL), Inc.
Scholarship Application
Community Member/ Elder Recommendation Form**

(Please return recommendation to applicant in a sealed envelope.)

Community Member/Elder Name: _____

Student Name: _____

Position/Organization Affiliation of Community Member or Elder:

How long have you known this applicant? _____

Please circle the number that represents your experience with this applicant as related to the qualities listed below. One represents the lowest score and five represents the highest score.

Indicator	Lowest				Highest
Willingness and ability to contribute to the community	1	2	3	4	5
Cooperation, Social and Emotional maturity	1	2	3	4	5
Character, integrity, and honesty	1	2	3	4	5
Creativity and originality of thought	1	2	3	4	5
Consideration for and attitude towards others	1	2	3	4	5
Flexibility, willingness to adapt to new situations and accept changes	1	2	3	4	5
Motivation, initiative, and self-starting ability	1	2	3	4	5
Willingness to pursue visionary ideas	1	2	3	4	5
Self-discipline, responsible, and dedication to following through	1	2	3	4	5
Creativity and originality of thought	1	2	3	4	5
Inquisitiveness, interest in a variety of topics and issues	1	2	3	4	5

As you respond to the following questions, please be sure to include specific details and examples. Brief responses that lack specific information do not provide the selection committee with sufficient information and will result in a lower score. Please respond to the following questions on a separate sheet of paper. Must type responses.

1. What is the potential of the applicant as a future leader in his/her chosen profession?

2. What do you consider as the most relevant strength and weakness of this applicant as a member of the community?

3. Please include information not mentioned elsewhere in your recommendation. (OPTIONAL)