



Skills For Hope Foundation Scholarship Recommendation Form

The applicant has asked you to give them a recommendation as the individual has applied for a Skills For Hope Scholarship. Thank you for supporting the individual in their educational endeavours. In order for the applicant to be considered, we must receive this form before the deadline date, 19th March 2025. Please email the completed form to scholarships@skillsforhope.org.

- Date:
- Referee: First Name: _____ Last Name: _____
- Address: _____
- Email: _____ Phone: _____
- Position: _____
- *Applicant's: First Name: _____ Last Name: _____*
- How long have you known the applicant?
- What is your relationship to the applicant?
- If the applicant is successful, do you want us to also inform (email) you:
Yes or No
- Please comment on your knowledge of the candidate's: academic performance, work, motivation, work ethic, character, challenges the candidate has faced and overcome, volunteer work or/and community engagement, community work. Most importantly, please include, reasons why you feel the candidate should be given this scholarship, how you think this will help him/her/them, and the impact of this Award. Please provide as many details as you can. Thank you, and please don't hesitate to contact us if you have any queries.

