



## Recommendation for Jane M. Klausman Women in Business Scholarship

Please return this form by: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature is required (Insert image of your signature or print, sign and scan this page.)

**Applicant:** \_\_\_\_\_  
Last (Family) Name
First
Middle

**Recommendation from:** \_\_\_\_\_  
Name
Position/Title

\_\_\_\_\_  
College/university/institute/business/organization

The applicant above has applied for a Jane M. Klausman Women in Business Scholarship. The Jane M. Klausman Women in Business Scholarship Evaluation Committee greatly values and appreciates your opinion. Please discuss the applicant's accomplishments; current academic program or work experience; intellectual independence; capacity for analytical thinking; ability to organize and express ideas clearly; creativity; motivation; and potential for learning and succeeding in a business-related field. You may write your recommendation letter on letterhead of your choice; however, you must sign and submit this form with your letter of recommendation to the address below.

How long have you known the applicant? \_\_\_\_\_

Please rate the applicant with respect to your experience with other students/employees in this field/position:

- |   |   |  |   |  |  |
|---|---|--|---|--|--|
| <input type="checkbox"/><br>Exceptional<br>Top 5% | <input type="checkbox"/><br>Very Good<br>Next 10% | <input type="checkbox"/><br>Good<br>Next 15% | <input type="checkbox"/><br>Average<br>Next 30% | <input type="checkbox"/><br>Below<br>Average<br>Last 40% | <input type="checkbox"/><br>Insufficient opportunity to<br>observe |
|---|---|--|---|--|--|

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\_\_\_\_\_  
Date

Return form to Zonta Club of:		Mailing Address:	
City:		State/Province:	
Postal Code:		Country:	
Fax:		Email Address:	