



RECOMMENDATION FORM for _____
 Name of Scholarship Applicant

FORMS MUST BE SUBMITTED BY MAY 1, 2026 by emailing Amy Scholtes at ascholtes@gibank.com

The following information is confidential and will be used in this manner by the scholarship committee.

1. In what capacity have you known this individual (student, employee, friend, etc.)?
2. How long have you known him/her?
3. How would you describe the above applicant regarding: (Check your choices)

| | Very Strong | Strong | Weak |
|--|-------------|--------|------|
| Character | | | |
| Ambition and Work Habits | | | |
| Dependability (Accuracy-Promptness) | | | |
| Personality (Ability to get along with others) | | | |
| Leadership | | | |
| Communication Skills | | | |

4. Comments that would be helpful for the committee making scholarship award decisions:

Information provided in this application will be used solely for the purpose of evaluating scholarship eligibility and selection. It will not be shared outside of Global Innovations Bank except as necessary for administration of the scholarship and will not be retained longer than needed for that purpose.

Printed Name _____

Signature _____