



School of Continuing Studies

Recommendation Form: Osher Reentry Student Scholarship

Applicant's name: _____ Deadline _____

How long have you known the applicant? _____ In what capacity? _____

How well do you know the applicant? ☐ very well ☐ fairly well ☐ not very well

Please rate the areas in which you feel you have adequate knowledge of this applicant:

	<i>Outstanding</i>	<i>Very Good</i>	<i>Good</i>	<i>Average</i>	<i>Marginal</i>	<i>Not enough knowledge</i>
Commitment to academics						
Community involvement						
Leadership						
Employment record						
Overall rating						

Comments (optional):

Recommender's contact information:

Name: _____ Job Title: _____

Telephone: _____ Address: _____

City: _____ State: _____ Zip code: _____

Signature: _____ Date: _____

Thank you for taking the time to complete this form on behalf of the applicant by the deadline..

Return to: Northwestern University
School of Continuing Studies
Osher Reentry Scholarship Committee
Wieboldt Hall, 6th Floor
339 East Chicago Avenue
Chicago, IL 60611