

**School of Professional Studies
Scholarship Recommendation Form**

Recommender Information:

Name: _____ Title: _____
University email: _____ University phone: _____

Student Scholarship Applicant Information:

Applicant's name: _____ Program: _____
Course(s) applicant took with you: _____

Please answer these questions with a Yes or No:

1. This student demonstrates high-level understanding of program field of study Yes No
2. This student demonstrates a high-level commitment to academics Yes No
3. This student displays excellent communication and collaboration skills Yes No
4. This student demonstrates leadership ability/potential Yes No
5. This student acts professionally and ethically towards classmates and you the instructor Yes No
6. Overall assessment of applicant as a member of his/her learning community:
 Outstanding Strong Average Weak

Global Health Fieldwork Scholarship Recommenders only:

- This student displays a sense of social justice and understands the importance of building capacity for partner organizations Yes No

Additional comments (optional):

Signature: _____ Date: _____

Email completed form *from your university email* to: spsscholarships@northwestern.edu

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