# Broward County Gator Club® Scholarship

**Applicant Recommendation Form**

**TO THE APPLICANT:** You must have two (2) completed recommendations from two (2) separate people who know you well. One must be filled out by someone from your school, and one must be filled out by someone outside of your school.

**TO THE RECOMMENDER:** Please answer the following questions. *Save the file in the format of student last name\_Rec* and return this form to the Broward County Gator Club, via [this link](https://www.dropbox.com/request/IlWuXXkXDbWX6q3kyOyK). This form may be typed or handwritten. If you have any questions, please contact BCGC Academics at bcgcacademics@gmail.com. Thank you for your assistance.

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| Applicant Name: | |
| Reference Name: | |
| Organization: | Title: |
| E-Mail: | Phone: |

**Select one**: \_\_\_\_\_\_\_In school rec. \_\_\_\_\_\_\_\_ out of school rec.

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| 1. How long and in what capacity have you known the Applicant? |
| 1. What do you consider the Applicant’s primary strengths to be? |
| 1. Why do you feel the Applicant is a good candidate for Broward County Gator Club Scholarship? |
| 1. Please share any additional information you believe should be taken into consideration when reviewing this applicant. |
| Reference Signature: Date: |