

The Michaels Organization Educational Foundation

Scholarship Application

Personal Character Reference Form

Name of Applicant: _____

Address of Applicant: _____

Name of Person Providing Referral: _____

Address of Person Providing Referral: _____

Telephone Number of Person Providing Referral: _____

Relationship of person providing referral on behalf of the applicant (Example: Teacher, Guidance Counselor, Professor, Employer...) _____

Please circle the most appropriate response for the applicant you are referring and attach a narrative on your letterhead stationary. Please consider each item shown below independently from the others listed.

	Poor		Good		Outstanding
Dependability	X	X	X	X	X
Honesty	X	X	X	X	X
Perseverance	X	X	X	X	X
Cognitive Aptitude.....	X	X	X	X	X
Conscientiousness.....	X	X	X	X	X
Concern for Others.....	X	X	X	X	X
Leadership	X	X	X	X	X

I attest that the aforementioned reference of _____
is true and accurate to the best of my knowledge. I am not a blood relative of this applicant.

Signature

Date

Return this form to the applicant for submission prior to **May 23, 2019**, or mail directly to Dr. Bruce W. Johnson, The Michaels Organization, 3 East Stow Road, Suite 100, P.O. Box 994, Marlton, New Jersey 08053-0994.

Please provide a brief narrative of your thoughts regarding the applicant's personal character. Be sure to mention how you came to know the applicant and how long you have been acquainted with the individual. Other information helpful to the Selection Committee would include your perception of the applicant as a student, your belief in the applicant's ability to successfully pursue a college degree, and any unique characteristics the individual may possess.



Michaels

EDUCATIONAL
FOUNDATION