

**THOMAS PETERSON FARY AND ALVIN JENETTIE ROANE FARY**  
**MEMORIAL SCHOLARSHIP**  
**P.O. Box 485, Tappahannock VA 22560**

**LETTER OF RECOMMENDATION**

**TO APPLICANT:**

Please complete the top section of this form and deliver the form to your selected reference. **REMEMBER**, the three Letters of Recommendation must include either (a) two letters from current or former high school academic instructors **OR** (b) one letter from a high school guidance counselor, high school appointed advisor, or high school principal and one letter from a current or former high school academic instructor. The remaining Letter of Recommendation may be from any other person of your choice. Reference will return the completed letter to you in a sealed envelope. All three Letters of Recommendation must be mailed to the Fund with your FAFSA SAR Report in a single package and must be postmarked by **JANUARY 16, 2017**.

**NAME OF APPLICANT:** \_\_\_\_\_

**NAME OF REFERENCE:** \_\_\_\_\_

**RELATIONSHIP TO APPLICANT:** \_\_\_\_\_

**ADDRESS OF REFERENCE:** \_\_\_\_\_

**TO REFERENCE:**

The applicant named above has applied for a scholarship from The Fary Memorial Scholarship Fund. The scholarship is a competitive, four-year scholarship awarded only to the best of the applicants. Your opinion will be given considerable weight; consequently, your attention to a thoughtful completion of this form is very important.

Please complete and return the form to the applicant in a **SEALED** envelope, identifying the name of the applicant on the outside of the envelope. The applicant will include your sealed reference with other material he/she will mail to the Fund. For purposes of clarification, the Trustee may contact any person submitting a recommendation for the applicant.

**OVERALL, I (Please check one):**

- RECOMMEND THE APPLICANT WITHOUT RESERVATION**
- RECOMMEND THE APPLICANT WITH SOME RESERVATION**
- RECOMMEND THE APPLICANT WITH SERIOUS RESERVATION**
- DO NOT RECOMMEND THE APPLICANT**

(1)

**Applicant:** \_\_\_\_\_

**PART I:**

**PLEASE RATE THE APPLICANT ON THE FOLLOWING QUALITIES. RATE ONLY THE QUALITIES OF WHICH YOU HAVE DIRECT KNOWLEDGE.**

<b>QUALITY</b>	<b>NOT OBSERVED</b>	<b>LESS THAN SATISFACTORY</b>	<b>SATISFACTORY</b>	<b>EXCELLENT</b>	<b>OUTSTANDING</b>
<b>SCHOLASTIC ABILITY</b>					
<b>CITIZENSHIP</b>					
<b>MOTIVATION</b>					
<b>ORGANIZATIONAL SKILLS/WORK HABITS</b>					
<b>COMMUNICATION SKILLS</b>					
<b>LEADERSHIP POTENTIAL</b>					
<b>RELATIONSHIPS WITH PEERS</b>					
<b>OTHER (IDENTIFY)</b>					

**PART II:**

Please TYPE responses to the following on separate 8½ X 11 plain paper. On each sheet, identify the applicant and item. The responses must be attached to this form.

- 1. DESCRIBE THE LENGTH OF TIME AND CONTEXT IN WHICH YOU HAVE KNOWN THE APPLICANT.**
- 2. DESCRIBE THOSE OBSERVATIONS OF THE APPLICANT THAT HAVE LED YOU TO RECOMMEND THIS PERSON FOR A FARY MEMORIAL SCHOLARSHIP. GIVE SPECIFIC EXAMPLES.**

**SIGNATURE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**Telephone number (optional):** \_\_\_\_\_