



**WESTERN ASSOCIATION OF EDUCATIONAL OPPORTUNITY PERSONNEL
Central California Chapter
2019-2020 Scholarship Application**

Name of Student: _____ School: _____

ATTENTION:

The Recommender form must be completed by a teacher, high school counselor, community member or any individual who can professionally assess your aptitude and personal qualities. **Your WESTOP CenCal Nominator may not submit a letter of recommendation nor a recommender form.**

To the Recommender:

The above-named applicant is applying for a scholarship with the Western Association of Educational Opportunity Personnel (WESTOP) Central California (CenCal) Chapter. You may **check mark** this form to best describe the applicant, as you know them. Please include any information on the applicant that you feel is pertinent when writing the separate letter of recommendation to describe the qualities and experiences you believe make this applicant a deserving candidate for the WESTOP CenCal Scholarship. Please scan your written Recommender Form along with your letter of recommendation into one PDF and email to the applicant. This process will allow the applicant to then, upload the file to the scholarship application. Thank you very much for your participation and assistance with this.

| CATEGORIES | SUPERIOR | ABOVE AVERAGE | AVERAGE | BELOW AVERAGE | NO BASIS FOR JUDGEMENT |
|--------------------------|----------|---------------|---------|---------------|------------------------|
| Academic Achievement | | | | | |
| Motivation | | | | | |
| Initiative/ Independence | | | | | |
| Self-Discipline | | | | | |
| Strength of Character | | | | | |
| Leadership | | | | | |
| Creativity | | | | | |
| Overall Potential | | | | | |