Name of Scholarship Applicant	

The St. David's Society of Utica, New York, Inc.

Scholarship Program

Applicant Appraisal Form

To be completed by a high school or college counselor or advisor, an instructor, or a supervisor.

You have been asked to provide information in support of an application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return this form directly to the applicant in a sealed envelope. This form must be received by the applicant in time to submit it (by US Mail) before the June 1 deadline.

The applicant's choice of a post- secondary education program is:	☐ Extremely appropria	ate	☐ Moderately appropriate	☐ Inappropriate	
The applicant's achievements reflect his/her ability:	☐ Extremely well	☐ Very well	☐ Moderately well	☐ Not well	
The applicant's ability to set realistic and attainable goals is:	☐ Excellent	☐ Very good	☐ Fair	☐ Poor	
The quality of the applicant's commitment to school and community is:	☐ Excellent	☐ Very good	☐ Fair	☐ Poor	
The applicant is able to seek, find and use learning resources:	☐ Extremely well	☐ Very well	☐ Moderately well	☐ Not well	
The applicant demonstrates curiosity and initiative:	☐ Extremely well	☐ Very well	☐ Moderately well	☐ Not well	
The applicant's respect for self and others is:	☐ Excellent	☐ Very good	☐ Fair	☐ Poor	
Appraiser's signature			()		
Print or type appraiser's name		le	telephone		
Appraiser's work address				zip	
Relationship to applicant How			Iow long have you known applicant?		