

CREIGHTON UNIVERSITY WILLIAM JENNINGS BRYAN SCHOLARSHIP RECOMMENDATION FORM

Applicant's Name _____

I hereby waive all access to the information stated below:

Signature of applicant _____ Date _____

To the person making the recommendation:

Please complete this page and return it to:

Marty Birkholt
 Department of Communication Studies
 Creighton University
 2500 California Plaza
 Omaha, NE 68178

How long have you known this student? _____ In what capacity? _____

Check the most appropriate box concerning this student:	No Basis for Judgement	Below Average	Average	Good	Excellent (top 10%)	Outstanding (top 5%)	One of the top Few Encountered in my career
Creative, Original Thought							
Independence Initiative							
Intellectual Ability							
Extracurricular Involvement (not forensics)							
Leadership							
Emotional Maturity							
Respect for Authority							
Response to Coaching							
Level of Involvement in Forensics							
Accomplishment in Forensics							
Potential in Forensics							
Support for Teammates							

If there is any additional information you wish to include please write it on the back of this form or attach a separate page.

Name of person giving Reference _____

Position _____ Phone number _____

Address _____

Signature _____ Date _____