

Presidential Scholarship

Letter of Recommendation Form Deadline: January 15, 2024

Name of Applicant

						1
Last Name		First Name			M.I.	UH ID Number
Name of Recommender						
Last Name		First Name			Relationship to Applicant	
Recommendation						
Please indicate your overall recon	nmendation for t	his applicant	:			
Highly Recommended	Recommend	ed	Recommended with Reserv		ation	Do Not Recommend
Please limit your response to the	space provided:					
Recommender Signature		Date				