



The applicant named below is applying for the Hispanic Heritage Council of WNY Ralph R. Hernández Bilingual Education Scholarship for college and would like your recommendation. Please return this form to the applicant.

APPLICANT'S NAME: _____

Your name: _____

Your occupation and title: _____

Phone number (inc. area code) _____ Email: _____

How long, and in what capacity have you known the applicant?

Please check the appropriate columns:

	Excellent	Very Good	Good	Fair	Poor
Academic Achievement					
Persistence					
Seriousness of Purpose					
Self-Discipline					
Intellectual Curiosity					
Organizational Skills					
Commitment to the Hispanic Community					

Please state your reasons for recommending the applicant by attaching a word document.

You may include a signed and dated independent letter of recommendation in addition to or in lieu of this form.

Your Signature: _____

Date: _____

The Hispanic Heritage Council of WNY, Inc. is a non-profit organization comprised of volunteer members.
e-mail address: info@hispanicheritagewny.org