

# CENTRAL UNION CHURCH



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## Letter of Recommendation Form for Central Union Church Women's League Scholarship

APPLICANT'S NAME \_\_\_\_\_

(Last)

(First)

(Middle)

INFORMATION to the PERSON WRITING the SUPPORTING LETTER: **THIS LETTER of SUPPORT MUST BE RECEIVED by the COMMITTEE BEFORE the LAST DAY of February in ORDER for the APPLICANT to be CONSIDERED.**

Your comments regarding the applicant named above will be of great value to us. Please be as **specific** as possible. We would appreciate your insights into such areas as: the applicant's scholastic potential, character, motivation, financial need, and service to the community. In addition, please indicate how long and in what capacity you have known the applicant.

Please forward this form, and any additional sheets, as SOON as POSSIBLE, as ONLY the FIRST 60 COMPLETED APPLICATIONS WILL BE CONSIDERED.

Mail to: Chairperson, Scholarship Committee, Women's League, Central Union Church, 1660 South Beretania Street, Honolulu, HI 96826

Date: \_\_\_\_\_

Comments: (You may use the reverse side of this sheet or attach additional sheets as necessary).

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Title and affiliation \_\_\_\_\_

Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

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