

LETTER OF RECOMMENDATION FORM

Must be mailed or emailed by applicant to lraef@lra.org by 11:59 pm on March 25, 2021

I, _____ recommend _____ for a Louisiana Restaurant Association Education Foundation Scholarship. I understand that the student has immediate plans to pursue or is currently enrolled in a post-secondary foodservice program.

How long have you known the applicant _____

Relationship to the applicant _____

Restaurant/Company/School Name _____

City _____ State _____ Zip _____

Phone Number (____) _____ Email address _____

Please rank the applicant in each of the following areas:

- | | | | | | |
|--------------------------------|----------|----------------------------------|----------|---------|---------------------------|
| Excellent (5) | Good (4) | Average (3) | Poor (2) | N/A (1) | |
| ___ Communications skills | | ___ Character | | | ___ Industry Interest |
| ___ Organization | | ___ Maturity | | | ___ Career Commitment |
| ___ Resourcefulness/Creativity | | ___ Leadership | | | ___ Professional Demeanor |
| ___ Quality of Work | | ___ Responsibility/Dependability | | | |

CHARACTER OF STUDENT

Please indicate in the space below how you feel about this student's character and quality of work. (Include applicable comments about his/her professionalism, teamwork, attendance, and punctuality.)

SPECIFIC ACHIEVEMENTS

What has this person done for you either as an employee or a student that causes you to make this recommendation for a scholarship?

Signature: _____ Date: _____

Optional: Please provide a narrative Letter of Recommendation with any information that you feel will help the Scholarship Committee in their decision.

