

## Athens Area Human Relations Council, Inc. PO Box 495 = Athens, GA 30603-0495 = Phone: (706) 546-6799 www.humanrelationscouncil.org

## **RECOMMENDATION FORM 2**

Please respond to the following questions thoroughly. Be sure to type your answers in the space provided. You may also respond to these questions in a letter of recommendation. This form or the letter of recommendation must be emailed to the Scholarship Committee at the following email address: **scholarships@humanrelationscouncil.org** by 11:59 pm on Friday, September 26, 2025. The Human Relations Council will not be accepting any materials by postal mail. The person completing the recommendation must email it directly to the Scholarship Committee. Thank you for your cooperation.

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APPLICANT NAME: [Insert Applicant Name]	
1. Please describe your estimate of the applicant's abilities and punctuality, attitude, sense of commitment and responsibility.	character; include work habits,
2. Please describe your estimate of the applicant's probable success in his/her chosen program of education or career goal.	
3. Other Comments	
NAME:	DATE:
TITLE/SCHOOL OR ORGANIZATION:	
RELATIONSHIP TO APPLICANT:  PH	IONE:
WOULD YOU LIKE TO BE NOTIFIED IF APPLICANT IS AWARDED A SCHOLARSHIP?	
IF YES, PLEASE PROVIDE EMAIL ADDRESS:	