

## Personal Recommendation

- The application receipt deadline is April 26, 2010

Applicant name \_\_\_\_\_  
Last First

### ► TO THE APPLICANT:

Please give this form to an adult who knows you personally (not a parent or relative), such as a mentor; coach; music, dance, drama, or art instructor; teacher (past or present); supervisor; employer; scout leader; or camp counselor. Request that the recommender return the completed form to you in a sealed, signed envelope so that you may submit it with your complete application packet (unless he/she would prefer to mail the recommendation directly to the address below). We will only accept one Personal Recommendation form per applicant.

### ► TO THE RECOMMENDER:

The Foundation's Young Scholars Program is designed to nurture exceptional students who have demonstrated, through academic excellence and extracurricular activities, that they have the potential to excel. A Foundation educational adviser works closely with Scholars and their families to construct a tailored educational program that includes, but is not limited to, support for high school selection, summer programs, distance learning courses, and music and art instruction. Each year, the Foundation receives more than 1,000 applications from 7th graders nationwide and selects approximately 50 Young Scholars using the criteria below. While all these criteria are important, the Foundation pays particular attention to the first two.

- **Academic ability and high achievement:** Strong academic record, academic awards and honors, and substantive assessments by educators providing confidential letters of recommendation. We consider grades (typically a GPA above 3.65, or mostly 'As'), achievement test scores, commitment to learning, and work ethic. Exceptions for GPA may be considered for applicants with unique talents or learning differences.
- **Unmet financial need:** Limited family income and insufficient funds to cover most or all education-related expenses.
- **Will to succeed:** Determination and perseverance in the face of challenges, and success in other pursuits.
- **Leadership and public service:** Initiative on behalf of others, such as participation in volunteer, community, and school-related activities.
- **Critical-thinking ability**
- **Appreciation for or participation in the arts and humanities**

We appreciate your cooperation in completing this form. Your observations are an important part of the student's application. Your recommendation will be read only by the Foundation's selection committee and will not be shared with the student or his/her parent(s)/guardian(s).

**Please complete this recommendation form and return it to the applicant in a sealed envelope with your signature written across the seal. Please allow sufficient time for the applicant to submit it with the completed application package by the April 26, 2010 receipt deadline. If you would prefer to mail your recommendation directly, please mail all forms to:**

**Jack Kent Cooke Foundation  
Young Scholars Program  
301 ACT Drive, PO Box 4030  
Iowa City, IA 52243**

**1-800-498-6478 (for use on overnight delivery forms)**

\_\_\_\_\_  
Name Last First  
\_\_\_\_\_  
Position/Title  
\_\_\_\_\_  
How long have you known the applicant?  
\_\_\_\_\_  
Email address Work phone ( )  
\_\_\_\_\_

## Personal Recommendation

Applicant name Last \_\_\_\_\_ First \_\_\_\_\_

**PLEASE ASSESS THIS APPLICANT AS COMPARED WITH HIS/HER PEERS:**

	<b>One of the Top Few I Have Ever Encountered</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>No Basis for Judgment</b>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to live within rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer compatibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warmth of personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity (relative to age)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resiliency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall evaluation as a person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall evaluation as a student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you consider the applicant remarkably strong or notably weak in any of the above areas, please elaborate.

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## Personal Recommendation (continued)

Applicant name \_\_\_\_\_  
Last First

Please describe your relationship with the applicant.

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What are the first three words that come to mind to describe this applicant?

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_

Please indicate the level of talent and commitment the applicant demonstrates.

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Please comment on the applicant's personal qualities. What makes this young person special?

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I certify that all information provided on this Personal Recommendation is accurate.

\_\_\_\_\_  
Signature (required)

\_\_\_\_\_  
Date