New Jersey Cheerleading & Dance Coaches Association Coach's Scholarship Recommendation Form CONFIDENTIAL

Name of Scholarship A	pplicant:		
School:			
Coach's Name			
Address			
Phone: Day:		Evening:	
Please rate your student by		_	•
Competencies	Acceptable	Good	Excellent
1 Student Leadership			
2 Spirit & Enthusiasm			
3 Community Involvement			
4 Cooperation & Helpfulness			
5 Team Leadership			

Questions & Comments: (Use back of this form or make attachment.)

- 1. Do you believe this scholarship will have a positive impact on the student's future? Explain briefly.
- 2. Does this cheerleader/dancer have any extenuating family financial issues that would represent an increased need for this scholarship? If so, please briefly explain (all information is kept strictly confidential.)

Your additional written comments regarding the applicant are weighed in judging for scholarship consideration and are greatly appreciated.

Return to: Doug Linden, 276 Stamets Road, Milford, NJ 08848

Deadline: March 17 of the current year