



2. In what way(s) do you see this applicant as a worthy recipient of this scholarship award?

3. How would you rate the applicant in the following areas?

	Excellent	Very Good	Good	Average	N/A
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seriousness of purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Please elaborate and give specific examples of those areas where the applicant has demonstrated exceptional qualities listed in question 3.

5. Additional comments?

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please send form to:  
HRCCA Scholarship Committee  
Preferably by email: [scholarship@hrcca.ca](mailto:scholarship@hrcca.ca)

Or by mail:  
P.O. Box 60016  
RPO Glen Abbey  
Oakville, Ontario  
L6M 3H2  
Or via fax: 905-842-5561