**Zion United Church of Christ**

113 1st Street, NE Waukon, IA 52172 563-568-3589

x.zionunitedchurch@mchsi.com

**Zion UCC Scholarship Reference Evaluation Form**

***Applicant’s Name****:*

***Name of Reference:***

***Relationship to Applicant:***

***How long have you known applicant:***

***Contact Information:*** *(Phone)*

*(email)*

***Please evaluate the applicant based on the following:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Exceptional | Above  Average | Average | Unknown to Me |
| Leadership Skills |  |  |  |  |
| Teamwork Skills |  |  |  |  |
| Organization Skills |  |  |  |  |
| Work Ethic |  |  |  |  |
| Dependable |  |  |  |  |
| Initiative/Self Starter |  |  |  |  |
| Listening Skills |  |  |  |  |
| Communication Skills |  |  |  |  |
| Problem Solving Skills |  |  |  |  |
| Follow through/Completes tasks |  |  |  |  |
| Commitment to School & Community |  |  |  |  |

***Written Recommendation\*:***

*I certify the above information is accurate and competed to the best of my knowledge.*

(Date)

Reference Signature/Date\*\*

**\**Feel free to use the back of this sheet or attach a separate sheet of paper for your written evaluation.***

**\*\**Please complete and return this form to Zion UCC in the envelope provided by May 25, 2025.***