



Recommendation Form #1 (to be fully completed by an adult who is NOT a family member)

Applicant's Name _____

Recommender's Name _____

Address _____

Telephone _____ E-mail _____

In what capacity do you know this applicant? _____

How long have you known this applicant? _____

To the best of your knowledge, does this person demonstrate:

(Check as appropriate)

	Excellent	Good	Somewhat	Little
Responsibility				
Confidence				
Emotional Stability				
Communication Skills				
Creativity				
Resourcefulness				
Leadership Skills				
Works Well in Groups				
Successful in School				
Successful in Friendships				
Listening Skills				

You may use another page for the following (please include applicant's name and your name at the top of the page). Please visit <https://tomorrowwomen.org/youngleaderprogram/> for a description of the program.

1. Why do you think this applicant would benefit from this program?
2. How do you think our program will benefit from the applicant's participation?
3. Please include anything else that you think may be important to know about this applicant. If you have questions, contact noa@tomorrowwomen.org.



Recommendation Form #2 (to be fully completed by an adult who is NOT a family member)

Applicant's Name _____

Recommender's Name _____

Address _____

Telephone _____ E-mail _____

In what capacity do you know this applicant? _____

How long have you known this applicant? _____

To the best of your knowledge, does this person demonstrate:

(Check as appropriate)

	Excellent	Good	Somewhat	Little
Responsibility				
Confidence				
Emotional Stability				
Communication Skills				
Creativity				
Resourcefulness				
Leadership Skills				
Works Well in Groups				
Successful in School				
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