



# Altrusa International Foundation Scholarship

## ASTRA High School Scholarship Reference Form

**PLEASE USE THIS FORM ONLY. No additional pages or documents will be accepted.**

Scholarship applicant name:

Your name:  Date:

Capacity in which you know the applicant: (Check one)

Community Leader     
  School Principal or Teacher  
 ASTRA Advisor or Altrusa Club Member     

**1. In your association with the applicant, state how they have demonstrated TWO of the following FOUR characteristics or accomplishments: 1) leadership or academic ability; 2) accepted and followed through on responsibilities; 3) shared their talents; and 4) personal achievements they have accomplished either at school or in the community:**

**2. Additional information or comments that would help the Judging Committee assess this applicant:**