

Victor Q. Giles Memorial Scholarship



Recommendation Form

Referrer Information & Remarks

All forms due March 31, 2021

Your Name	_____
	(First) _____ (Last)
Job/Position/Title	_____
Phone Number	() _____
Email	_____
How do you know the student?	_____
How long have you known the student?	_____
Please provide the selection committee a brief perspective of the nominee in each of following categories. If not observable in your particular position or capacity, please leave blank.	
Character/Morals	_____

Work Ethic/Self-Motivation	_____

Empathy to Others/Community Service	_____

Anything else you would like to add	_____

Thank you for taking the time to recommend this student-athlete!

You may scan and email this to 2touchemall@gmail.com or mail to Touch Em All
6170 Herinhut Rd. Winston-Salem, NC 27127
or you may give to student to return.

