



The
Marcus Harris
Foundation

www.marcusharrisfoundation.org
info@marcusharrisfoundation.org

Robert B. Harris Memorial Scholarship Program

Personal Recommendation Form

We appreciate your willingness to support the applicant's efforts to join our Robert B. Harris Memorial Scholarship Program. Through the program, we offer financial assistance to matriculated college students who have demonstrated a strong commitment to community service and are leaders for positive change in the lives of those around them.

If you are or have been the applicant's mentor, coach, religious leader, or employer, please answer the questions below to give us your assessment of his/her personal traits and commitment to community service. This completed form can either be emailed to us at info@marcusharrisfoundation.org or mailed to:

Attn: Scholarship Committee
Marcus Harris Foundation
P.O. Box 11490
Durham, NC 27703

If you have any questions or concerns, please feel free to contact us at info@marcusharrisfoundation.org.

Applicant's Name: _____

Your Name: _____

Your Title: _____

Your Telephone Number: _____

Your Email Address: _____

How do you know the applicant? (e.g. mentor, coach, employer, etc.)

How long have you known the applicant?

Please describe any specific activities, deeds, and/or involvements that demonstrate the applicant's leadership and other strong characteristics. Please include any examples that help highlight his/her overall character.

Please describe the specific ways, if any, through which the applicant has demonstrated genuine concern for the welfare of others (e.g. community, church, family, etc.).

If you believe the applicant has overcome any unusual personal challenges over the course of his/her life, please describe them below. Please include any applicable examples of how s/he has demonstrated resiliency in the face of unexpected difficulty.

If there's any additional information you'd like us to know about the applicant, please share it below.

Your Signature:

Date:
