www.marcusharrisfoundation.org info@marcusharrisfoundation.org EIN: 81-4262845

104 Elmsford Street Durham, NC 27703

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 The Marcus Harris Foundation 104 Elmsford Street 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.

	cific ways, if any, through w of others (e.g., community,	hich the applicant has demochurch, family, etc.).	onstrated genuine
If you believe the appl	:		41 f
his/her life, please desci	ribe them below. Please inc y in the face of unexpected	nusual personal challenges of clude any applicable example difficulty.	es of how s/he has
his/her life, please desci	ribe them below. Please inc	lude any applicable example	es of how s/he has
his/her life, please desci	ribe them below. Please inc	lude any applicable example	es of how s/he has

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

Your Si	gnature:	 			
Date:					