



*American Values.
Hometown Roots.*

NEW YORK STATE GRANGE Scholarship Funds

100 Grange Place
Cortland NY 13045
Telephone: (607) 756-7553
Fax: (607) 756-7757

SCHOOL EVALUATION

PLEASE NOTE CAREFULLY: This form should be filled out by the Principal or Superintendent of the high school from which the student is to be graduated, (or by your college advisor) and should be mailed directly to the New York State Grange. Recommendations should be submitted as early as possible after seven semesters of high school work have been completed. Please answer all questions.

This form is the confidential property of the New York State Grange Scholarship Foundation.

PLEASE ATTACH THE FOLLOWING:

1. Copy of candidate's high school transcript and/or college transcript. (College freshmen should provide both)
2. Test results such as PSAT, SAT, ACT etc.
3. Record of student's extra-curricular activities, honors, prizes received.

CONFIDENTIAL INFORMATION

Name of Candidate _____

Home Address _____

Name of High School/College _____

Date of Graduation _____

Please rate the candidate by checking the appropriate column:

	High	Average	Low
Capacity to study without guidance			
Ability to think independently			
General intelligence			
Industry			
Seriousness of purpose			
Ambition			
Enthusiasm			
Leadership			
Personality, social adaptability			
Participation in student life			

Complete the following for high school students:

Student's average/GPA _____

Number in graduating class _____

Rank of applicant in class _____

Weighted _____ yes _____ no

The passing grades of the school are _____

The grades required for recommendation to college are _____

Name of Candidate.....

Please use this space for additional statements you wish to make about the applicant.

Date.....

Signature of Principal/Advisor_____