

College of Nursing (CON) Scholarship Recommendation Form

Student Name _____

Directions to Student: Submit only one completed Recommendation Form.

UNDERGRADUATE ☐

MSN ☐ **DNP** ☐

I recommend this student for the above checked scholarship. This student exhibits:

Rate: 1 = Poor to 5 = Outstanding

____ Professional behaviors

____ Motivation for nursing studies

____ Leadership Skills

____ Other Characteristics, describe:

Faculty: Print Name _____

Signature: _____

Date _____