



FRANKLIN AVENUE BAPTIST CHURCH SCHOLARSHIP HIGH SCHOOL TEACHER RECOMMENDATION

TO THE STUDENT: The teacher you ask to complete this recommendation form must be an eleventh or twelfth grade teacher who taught you in class. This form **must not** be completed by a school administrator (principal, counselor, coach, etc.) or a relative.

TO THE TEACHER: Please complete this form, sign, date and place it in your school's letterhead envelope. After the envelope is sealed, please sign your name across the edge of the sealed flap of the envelope and give it to the student. The student must return this form along with all application materials to the church by the **April 15th deadline**. Thank you in advance for your time and efforts.

(Form may be found on our website, printed, and given to student after completion)

STUDENT'S NAME (Type/Print)

TEACHER'S NAME (Type/ Print)

Year you taught student _____

Student's grade level when taught _____

Student's Graduation Year _____

OPTIONAL: Please use the space provided below to tell us why you are recommending the student for the scholarship. Feel free to add an additional sheet if necessary.

Teacher's Signature

Date