

Arts Teacher Recommendation Form:

Cab Calloway School Fund Scholarship Application 2020

Student Name:

Last	First	Middle
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This Cab Calloway student is applying for an arts scholarship. We ask for a recommendation from his/her arts instructor who can address student's commitment. **Please Note: If the teacher making this recommendation is the person providing the instruction or program, then a second recommendation from a different arts instructor is also required.**

Your evaluation will become part of the applicant's confidential file, intended for use only by the Cab Calloway Scholarships Selection Committee. **Please return this form in a sealed envelope to the applicant or send it directly to the address given. Be sure the applicant knows which you are doing.** The address is provided at the bottom of this form.

Recommender Full Name: _____

Class(es) you teach/taught this student: _____

Telephone/E-mail: _____

How long have you known this student? _____

Has the student discussed this scholarship request with you? In what specific ways will the requested program enhance his/her artistic abilities? Why do you recommend this student for the scholarship?

Signature: _____ **Date:** _____

Please return this form in a sealed envelope to the applicant or send directly to the address given below. To receive consideration, this form must be postmarked or received by **March 16, 2020.**

**Cab Calloway School Fund
P.O. Box 4642
Wilmington, DE 19807
Attention: CCSF Scholarships**