



# EDINBURGH COLLEGE

## Scholarship Application

### Referees Statement

Name of Student: \_\_\_\_\_

Type of Scholarship: [Circle one of the options below.]

Academic / Leadership / Creativity / Service / Sport / Music / Technology

Name of Referee: \_\_\_\_\_

Contact phone number: \_\_\_\_\_

Please respond to the following questions and add additional information where it will be relevant.

1. How long have you known the applicant? \_\_\_\_\_

2. Outline the specialized skills of the applicant.

---

---

---

---

3. Outline any awards or recognition that the applicant has received in relation to this scholarship application.

---

---

---

---

4. Please use this space to provide additional information that you feel may be relevant to the student's application.

---

---

---

---

5. Please sign the reference and return this form to the student who is making application for the College Scholarship.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_