

# COLLEGE / UNIVERSITY RECOMMENDATION FORM

## Scholarship Candidate

### Ohio Contractors Association – Toledo Chapter

Date: \_\_\_\_\_ (must be received by October 2, 2009)

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

Dear University / College Representative:

Thank you for taking time to complete this evaluation form for the above-named student. Your assessment, as an educator, is very important to us. It will be beneficial to members of the OCA Toledo Chapter Education Committee during the process of selecting candidates for this Award Program.

\* We have tried to make this form easier to fill out. We appreciate your willingness to participate in the scholarship application process.

#### EVALUATION FORM

On a scale of one to five, indicate your perception of student performance (one being least favorable, five being most favorable). Please circle the appropriate number.

Student preparation for class work (low) 1 2 3 4 5 (high)  
nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

Student participation in class discussion (low) 1 2 3 4 5 (high)  
nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

Student involvement in extra credit, extra curricular class activities (low) 1 2 3 4 5 (high)  
nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

Community service involvement of student (low) 1 2 3 4 5 (high)  
nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

To your knowledge, does student have any part time or full time employment responsibilities?  
Yes  No  nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

Comments on the Students academic situation:

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Evaluate student interest in working in the heavy and highway construction industry  
(low) 1 2 3 4 5 (high)  
nonapplicable \_\_\_\_\_ cannot answer \_\_\_\_\_

Where, in your opinion, does the student place in overall ability as compared with other students?

91 - 100 percentile \_\_\_\_\_  
80 - 90 percentile \_\_\_\_\_  
89 - 79 percentile \_\_\_\_\_  
87 - 68 percentile \_\_\_\_\_  
67 - 0 percentile \_\_\_\_\_

Any other comments you wish the committee to know regarding the applicant.

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Your Name: \_\_\_\_\_ Title: \_\_\_\_\_

University / College Program: \_\_\_\_\_

Telephone: \_\_\_\_\_

Please return to:

**THE OHIO CONTRACTORS ASSOCIATION  
TOLEDO CHAPTER EDUCATION COMMITTEE  
1313 Dublin Road  
Columbus, OH 43215**