



**Massapequa Soccer Club
2024 Scholarship Recommendation Form**

Applicant Name _____

Program _____

Advisor _____

Dear Advisor,

This recommendation letter is **confidential** and **will not be seen** by anyone within the club. Please return this form in **a sealed envelope with the applicant's name on the front and the program name to:**

Kathy Hillger
91 Harbor South
Amityville, NY 11701
ATTN: Scholarship Committee - Confidential

PLEASE RETURN SO IT IS RECEIVED BY NO LATER THAN MAY 1, 2024...THANK YOU!

Applicant Information:

Number of years involved in the program _____

If less than one year, please specify, in days or hours,

approximate Service time _____

Please check the appropriate rating for each specific contribution:

Contribution	Outstanding	Reliable	Somewhat reliable	Erratic
Professionalism				
Role-model to children				
Initiative				
Works well with peers				
Completes assigned tasks				
Decision-making ability				

Comments: