



Raymond Gordon Memorial Scholarship

Reference Form

Applicant Name _____

The above named student is applying for the Raymond Gordon Memorial Scholarship to assist in defraying the cost of pursuing higher education. You are being asked to assist the applicant in the scholarship process by submitting a reference on their behalf.

- 1 How long have you known the applicant? _____
- 2 In what capacity? _____
- 3 Are you aware of the applicant's desire to further his/her education beyond high school?
 Yes No
- 4 Briefly describe the applicant _____

- 5 What characteristics does the applicant possess that will make him/her successful in their future endeavors _____

- 6 Any additional information? _____

Signature _____ **Date** _____

Printed Name _____

Please mail completed form to:

**TRAC Services for Families
Scholarship Review Committee
Gateway View Plaza
1600 West Carson St
Pittsburgh, PA 15219**



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