

San Diego Unified School District

Board President's Scholarship Award

**APPLICANT REFERENCE
2017-18**

Name of Applicant_____

Date_____

Name of Reference_____

Current Position_____

Your position when supervising applicant_____

In the space provided below, please describe why you believe the applicant should be awarded the Board President's Scholarship.

If you are filling out the reference sheet electronically, please remember to save the document to your desktop or any information you have entered will be lost.

Return reference to applicant for submission with scholarship application **before October 23, 2017.**

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