

**THE STEPHEN PHILLIPS MEMORIAL SCHOLARSHIP FUND**

P.O. Box 870, Salem, MA 01970

**COLLEGE ACADEMIC RECOMMENDATION FORM**

**May 3 Deadline for Recommenders**

Thank you for helping this student apply to the Phillips Scholarship, which offers renewable, 4-year college scholarships to students with financial need who display academic achievement, a commitment to serving others, a strong work ethic, leadership qualities, and who exhibit grit when faced with hardship.

This form is for College Professors, Teaching Assistants or Academic Advisors, who may answer the questions below and/or include a letter of recommendation that addresses these topics. This form and any accompanying materials can be emailed to [staff@spscholars.org](mailto:staff@spscholars.org), faxed to 978-744-0456, or mailed to the Scholarship Office at PO Box 870, Salem, MA, 01970.

The student has waived his/her right to see all information submitted by recommenders. If you have additional comments or concerns, please call the Scholarship Office at 978-744-2111.

Student's Name \_\_\_\_\_

Recommender's Name \_\_\_\_\_

Recommender's Title \_\_\_\_\_

Recommender's Phone # \_\_\_\_\_ Recommender's Email \_\_\_\_\_

**Please comment on the following topics regarding this student:**

How long have you known this student?

Quality of written work:

Special circumstances/challenges: If you believe this student has endured special circumstances or has faced unusual challenges during his/her life that are not included in your letter of recommendation, please describe them below. Also, please give examples of how he/she has found support and demonstrated resiliency to function well in academic and personal settings.

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**COLLEGE ACADEMIC RECOMMENDATION FORM** – continued

Please comment on anything that you feel is important for us to know about this student.

College Recommender's  
Signature: \_\_\_\_\_

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