



**UW-SUPERIOR SCHOLARSHIP
LETTER OF RECOMMENDATION FORM**

Submitted on behalf of _____
Student's Name

NOTE TO THE RECOMMENDING PERSON:

The applicant's file must contain your recommendation before it is ready for consideration.

Please submit to:

Admissions Office
University of Wisconsin-Superior
PO Box 2000
Superior, WI 54880-4500
admissions@uwsuper.edu
Fax: 715-394-8407

Summary and Recommendation:

Please provide a statement (in either the space below or as an attachment) in regards to the candidate include the particular qualities that make this student, in your judgment, an appropriate candidate for a University of Wisconsin-Superior Foundation Scholarship.

Signed _____ Position _____

Print Name _____

Length of Time Acquainted with Applicant _____