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| --- |
| **To the Applicant:** Complete the below Applicant Information and give this form to a counselor, teacher, community member, employer, or any individual who can comment about your potential to succeed in the Girls Inc. of Orange County 2020 Externship Program. **This form should not be completed by a family member or by the 2020 Externship Program applicant.****All letters of recommendation are due by January 5, 2020 by 11:59 pm.** **Late submissions will not be accepted.** |
| General Applicant Information |
| Full Name: | Email: |
| Phone: | Grade: | High School: |
| **To the Individual Completing this Form:**The person whose name appears above has applied for the Girls Inc. of Orange County’s 2020 Externship Program. The Externship Program application committee would appreciate you answering the questions below in specific detail that may add to the personal description for this applicant. If your relationship with the applicant does not allow you to make an evaluation of any item, please indicate N/A or not applicable. **All letters of recommendation are due by January 5, 2020 by 11:59 pm.** **Late submissions will not be accepted.** |
| Full name: | Position: |
| School/Organization: | Phone: |
| School/Organization Address: |
| 1. How long have you known the applicant? \_\_\_\_\_\_\_\_\_\_\_\_ years \_\_\_\_\_\_\_\_\_\_ months.

Under what circumstances? |
| 1. Based on your knowledge of the applicant, check how you rate her academic skills. If unknown, leave the area blank.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | Outstanding | Above Average  | Average | Needs Improvement |
| ACADEMIC ACHIEVEMENT |  |  |  |  |
| WRITING SKILLS |  |  |  |  |
| READING SKILLS |  |  |  |  |
| MATH SKILLS |  |  |  |  |
| ACADEMIC POTENTIAL |  |  |  |  |

 |
| 1. Check how you rate the applicant’s characteristics and motivations. If unknown, leave the area blank.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | Strongly Agree | Agree | Agree Somewhat | Disagree |
| Has positive self-image. |  |  |  |  |
| Demonstrates leadership capability. |  |  |  |  |
| Self-starter, has intellectual curiosity. |  |  |  |  |
| Is highly motivated. |  |  |  |  |
| Survives frustrating experiences, is tolerant of minor disappointments. |  |  |  |  |
| Has potential for growth. |  |  |  |  |

 |
| 1. How has the applicant demonstrated/shown personal growth during the time you have known her?
 |
| 1. To your best of knowledge, what are some key accomplishments this applicant has achieved? (In-school, after school, etc.)
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Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for taking the time to share the details of your recommendation regarding this applicant for the Girls Inc. of Orange County’s 2020 Externship Program. Please email the completed recommendation form to the following email address:

giocexternshipprogram@gmail.com

If you have any future questions, please feel free to reach out to Katherine Zertuche, Externship Coordinator at KZertuche@girlsinc-oc.org or call (714) 597-8612.