**Orange County Community College**  
**www.sunyorange.edu**  
**Office of Financial Aid**  
**Entering Freshman Scholarship High School Faculty Recommendation Form**

Recommendation For: _____________________________________________________________  
(Print Student’s Name)

*High School Faculty Member: ____________________________________________________  
(Print Name)

Please indicate the course(s) in which you have had this student?

__________________________________________________________________________  

The College’s Committee on Scholarship and Financial Assistance will be awarding entering freshman scholarships based upon academic potential, character and emotional maturity and any other relevant data you deem significant (i.e., contributions to the high school environment, etc.). Use additional sheet if needed.

(Please circle one)

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<th>Excellent</th>
<th>Poor</th>
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<tbody>
<tr>
<td>1. Academic Potential</td>
<td>1 2 3 4 5 6 7 8</td>
<td></td>
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<tr>
<td>2. Character</td>
<td>1 2 3 4 5 6 7 8</td>
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<tr>
<td>3. Emotional Maturity</td>
<td>1 2 3 4 5 6 7 8</td>
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</tbody>
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Overall Rank  
TOP 10% 20% 30% 40% 50% BOTTOM

__________________________________________________________________________  

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High School Faculty Signature _______________________________ Date _______________

Please return this form by March 1 directly to:  
Office of Financial Aid  
115 South Street  
Middletown, NY 10940
Recommendation For: ____________________________________________  (Print Student’s Name)

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