

**Scholarship Reference Form
Saginaw Valley State University
Department of Theatre**

Evaluation statement concerning: _____
(student name)

The person named above is an applicant for a Theatre scholarship at Saginaw Valley State University, a *highly demanding, time-intensive theatre program within a liberal arts setting*. Your remarks will be greatly appreciated and will insure the thorough consideration of this student. Please fill out both sides of this form completely and return on or before February 26, 2010.

Section One: Please circle the appropriate rating for each category and comment in the space below.

1. Acting Ability: Superior Above Average Average Below Average Poor

Comment:

2. Tech Theatre Ability: Superior Above Average Average Below Average Poor

Comment:

3. Scholastic Record: Superior Above Average Average Below Average Poor

Comment:

4. General Character: Superior Above Average Average Below Average Poor

Comment:

**5. Dependability/
Responsibility:** Superior Above Average Average Below Average Poor

Comment:

Section Two:

1. For how long and under what circumstances have you known the applicant?

2. Do you believe that the applicant should be granted a theatre scholarship? ___ Yes ___ No

3. Additional Comments:

Name: _____ Position/Title: _____

Signature: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Please mail or fax this statement directly to:

Department of Theatre
Saginaw Valley State University
7400 Bay Road
University Center, MI 48710
Fax: 989-964-4675

If you have questions please contact Steven C. Erickson, Department Chair, at: 989-964-4147 or erickson@svsu.edu