



**2019 ASHE ENGINEERING SCHOLARSHIP PROGRAM
HIGH SCHOOL SCIENCE/MATH TEACHER RECOMMENDATION FORM**

PART I (To be completed by High School Applicant)

APPLICANT'S NAME: _____
(Last) (First) (Middle)

PERMANENT ADDRESS: _____
(Street) (City) (State) (Zip)

LOCAL ADDRESS: _____
(if different from above) (Street) (City) (State) (Zip)

TELEPHONE NO.: _____ LOCAL TELEPHONE NO.: _____
(Area Code) (Area Code)

The student listed above has applied for a scholarship sponsored by the Harrisburg Section of the American Society of Highway Engineers (ASHE). As a part of the evaluation of the student's qualifications, the student's science or math teacher is requested to complete Part II of this form and forward it directly to ASHE. Your comments are an important consideration in the scholarship competition; use additional sheets as required to complete this form. All information contained on this form will be considered confidential by ASHE.

PART II (To be completed by Teacher)

SCIENCE/MATH TEACHER'S NAME: _____
(Last) (First) (Middle)

HIGH SCHOOL: _____

ADDRESS: _____

(Street) (City) (State) (Zip)

TELEPHONE NO.: _____ POSITION: _____
(Area Code)

EMAIL ADDRESS: _____

1. How long have you known the applicant? From _____ to _____
2. Is the applicant enrolled in a civil engineering curriculum or a civil technology curriculum? (please check one) () Civil Engineering () Civil Technology

3. What is the applicant's class standing (please check the most appropriate):

Top 5% Top 10% Top 20% Top 30% Top 50% Other

4. Are you aware of the applicant's involvement in extracurricular activities? () Yes
If yes, please comment. () No

5. Do you know of anything reflecting adversely on the integrity and general good character of the applicant?

6. Please comment on the applicant's character and reputation.

7. In what regard is the applicant held by his/her instructors?

8. In what regard is the applicant held by his/her fellow students?

9. Are you aware of any special financial difficulties being experienced by the applicant which should be considered by the scholarship committee. If so, please comment. () Yes
() No

10. Other:

SIGNATURE: _____ **DATE:** _____

The completed Recommendation Form should be postmarked (or emailed) by **April 5, 2019**, to the ASHE Scholarship Committee at the following address:

ASHE Scholarship Committee
Attn: Eric Martz, P.E.
KCI Technologies, Inc.
5001 Louise Drive, Suite 201
Mechanicsburg, PA 17055
717-516-7595
eric.martz@kci.com