

Scholarship Recommendation Form

Scholarship applicant name	
Current residential address	
Current university of study	University name Faculty Study year

I hereby confirm the above student possesses acceptable and/or excellent academic credentials, is of good character and health, and is recommended for this scholarship opportunity.

Validated by, (University President or faculty Dean)

Validated on,

Validated at, (University full name, address and contact details)

Apostille (official seal)