



# Adult Reference Form

Student's Name: \_\_\_\_\_

The York Builders Association wants to recognize young adults who have demonstrated a desire to excel in our community by helping them further their education with a scholarship. The above student has applied for our scholarship. Please help us to understand this student better by completing this form.

Please return form directly to the York Builders Association no later than **April 1, 2023**.

Mail completed form to: YBA Workforce NOW Scholarship Program  
540 Greenbriar Road  
York, PA 17404

Adult Reference Name: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Agency/Organization/Company: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Please comment on the student's responsibilities, time involvement, commitment, and character. Please use the back of this page to share additional comments.

	Poor					Outstanding				
Time commitment	1	2	3	4	5	6	7	8	9	10
Enthusiasm	1	2	3	4	5	6	7	8	9	10
Dependability	1	2	3	4	5	6	7	8	9	10
Attitude	1	2	3	4	5	6	7	8	9	10
Other_____	1	2	3	4	5	6	7	8	9	10

I hereby authorize the person named above to release information concerning my activities.

Student's Signature: \_\_\_\_\_