



Adult Reference Form, YBA Member Scholarship

Student's Name: _____

The YBA Workforce NOW Foundation 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 tool 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**.

Mail completed form to: YBA Workforce NOW Foundation
 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: _____

Questions regarding the completion of this form or the YBA Workforce NOW Scholarship Program can be directed to Melissa Longenberger. Telephone: 717-767-2444 or Email: Melissa@YBAworkforcenow.org