



**JUNIOR LEAGUE OF
GREATER SPRINGFIELD, MA**
Women building better communities

Applicant's Name:

Guidance Counselor Name:

School Name:

**PART 4A: JLGS SCHOLARSHIP- GUIDANCE COUNSELOR RECOMMENDATION
FORM – Page 1**

EVALUATION:

In the space below, please describe the applicant's service contribution to her school and community. Although this scholarship rewards excellence in voluntarism, we welcome your comments and observations on her academic achievement and overall extracurricular participation.



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PART 4A: GUIDANCE COUNSELOR RECOMMENDATION FORM – Page 2

Applicant Name:

School Name:

Guidance Counselor Name:

Counselor Phone Number:

Counselor E-mail Address:

Counselor Signature:

Date:

This section must be completed and signed by an authorized representative of the service organization listed. Supporting materials on organization letterhead are also acceptable. Student scholarship applications will not be considered complete without at least (1) guidance counselor recommendation and (1) volunteer supervisor recommendation.

All submissions should be emailed to: jlgs.scholarship@gmail.com

**If hard mailing is preferred over electronic and email submissions, please email the address above to obtain the JLGS mailing address.
Student application and all supporting materials must be received by March 31st**