



**PROGRAM RECOMMENDATION**  
PLEASE SUBMIT THIS LETTER OF RECOMMENDATION ON  
OR BEFORE MAY 28, 2021.

Read and follow the instructions carefully prior to submitting your recommendation. *Please do not return this completed form to the scholarship applicant.*

You have been asked to submit a letter of recommendation on behalf of this applicant for the Kevin O'Boyle Scholarship. Please use this form as a guide when writing your letter of recommendation or you may simply answer these questions. The letter of recommendation must be returned or postmarked by May 28, 2021.

**Mail to:** Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
12200 Fairhill Road, Suite E193  
Cleveland, OH 44120

**Scan & Email to:** info@cfadvocates.org  
**Fax to:** (216) 301-2640

**APPLICANT'S INFORMATION:**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Middle Name

How do you know the applicant?

Comment on the applicant's personal character and potential for future professional achievement.

What characteristics do you consider their greatest attributes?

What concerns do you have about the applicant, if any?

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email

\_\_\_\_\_  
Daytime Phone



\_\_\_\_\_  
Date