College of Architecture and Planning
Request for Recommendation Form

Instructions:
- Provide this form to the individuals you are requesting a recommendation from.
- Please inform your reference of the application due date ______________________
- References should return this form to Liz Marsh in the CAP Student Advising Office.

Reference’s name: ____________________________________________________________
Applicant’s name: ____________________________________________________________

This student is applying for the ______________________________ scholarship. The application, including this recommendation form, is due on ___________________ and he/she listed you as a reference on his/her scholarship application.

Please fill out the following Summary Evaluation for the above student with the understanding that this is a preliminary recommendation and you may be asked to write a letter in support of the above student at a later date.

Summary Evaluation

A. Scholarly or creative achievement:

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B. Promise or probability of success

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Additional comments (optional):

Reference’s Signature ___________________________ Date ________________

Reference’s Name (Please print)

Liz Marsh
College of Architecture and Planning
Campus Box 126
PO Box 173364
Denver, CO 80217-3364