

## **Student Government Recommendation Form**

(Three recommendations are required to complete the application submission)

## To the Applicant:

Type or print all information requested below and give this form to your reference. Your reference should be able to comment on your ability to succeed as a student leader. The reference should return the competed form directly to the Office of Student Activities or Campus Counselor. Please email or place in campus mail the form and corresponding letter.

## WVNCC Office of Student Activities ATTN: Regan Blaha rblaha@wvncc.edu

Applicant's Name:	_
Recommender's Name:	_
I hereby waive my right of access to this letter of recommendation:	
Applicant's Signature Date	_
All confidential information becomes the property of the WVNCC	
To the Reference: The applicant named above is applying to be a student government representative for W. Northern Community College	est Virginia
Reference's Information:	
Name:	_
Title:	_
Address:	_
Telephone Number:	_

PLEASE EMAIL the form and letter to the Office of Student Activities at rblaha@wvncc.edu or place it in campus mail.

Other: _				<del></del>
for a period o	f years and/or	months.		
2. Please eva	aluate this applicant or	the following:		
	Average or Below	Good	Excellent	Outstanding
Academic performance				
analytical ability				
Creative/original				
nought				
Disciplined work habits	}			
ndependence				
nitiative				
Iotivation				
esourcefulness				
elf-confidence				
eadership ability				
other (please specify):				
whom you	are comparing the ap	olicant, e.g. colleg	If the applicant to (please ge/junior/seniors, student	leaders, etc.):
student go  The ap includi Aspect	vernment leader by ac oplicant's potential stre ng examples of times	dressing the follogous engths in student I you have seen the ersonality and cha		and critical thinking, those strengths.
Recommender's S	ignature			Date