



APPLICANT:

PLEASE RESPOND TO THE FOLLOWING QUESTIONS. YOU MAY USE ADDITIONAL PAPER IF NECESSARY

1. IN THE SPACE BELOW, PLEASE DESCRIBE WHY YOU ARE INTERESTED IN PURSUING GRADUATE WORK.

2. IN THE SPACE BELOW, PLEASE DESCRIBE HOW YOUR DEPARTMENT WILL BENEFIT FROM YOUR PARTICIPATION IN THIS PROGRAM.

3. IN THE SPACE BELOW, PLEASE DESCRIBE HOW LAW ENFORCEMENT IN GENERAL WILL BENEFIT FROM YOUR PARTICIPATION IN THIS PROGRAM.

## CONFIDENTIAL RECOMMENDATION FORM

**APPLICANT:**

Please supply the information requested below. You may solicit more than the two required evaluations if in your opinion the information they provide would significantly affect the consideration of your application.

NAME OF APPLICANT: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

**PERSON MAKING RECOMMENDATION:**

Please supply the information requested. If you need additional sheets of paper, please staple them to this form. Your comments will be held in complete confidence.

NAME: \_\_\_\_\_

POSITION OR TITLE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

1. How long have you known the applicant? \_\_\_\_\_

2. Under what circumstances have you known the applicant?

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Use additional sheets if necessary:

PLEASE USE THE SPACE BELOW AND ADDITIONAL SHEETS IF NECESSARY TO MAKE ANY COMMENTS YOU THINK IMPORTANT CONCERNING THIS APPLICANT. WE WOULD ESPECIALLY APPRECIATE YOUR COMMENTS ABOUT (A) THE APPLICANT'S PERFORMANCE AS A MANAGER OR POTENTIAL MANAGER; (B) THE APPLICANT'S PROSPECTS FOR INCREASED MANAGERIAL RESPONSIBILITY; AND (C) THE RELEVANCE OF GRADUATE IN MANAGEMENT TO THE APPLICANT'S FUTURE.

Signature: \_\_\_\_\_

SDCLEF  
SCHOLARSHIP COMMITTEE  
PO BOX 31087  
SAN DIEGO, CA 92138-1087