Family of Faith Scholarship Fund

Albert and Hattie Thomas Award of Excellence Scholarship

Community Involvement Recommendation Form

Applicant Details
Please provide this recommendation form to a counselor, teacher, supervisor, community leader, or someone similar who can speak to your community involvement.

Once your recommendation form is complete, please upload the form to your scholarship application and submit it prior to the deadline for consideration. Your completed application must be submitted by the application deadline.

The application deadline is April 4, 2026, at 11:59 pm pacific time.

Recommender Details
You were selected to provide a recommendation for a student applying for the Albert and Hattie Thomas Award of Excellence Scholarship. Please complete the below recommendation form and return to the student.

The student must have this completed recommendation form to upload in order to submit their application prior to the deadline. The application deadline is April 4, 2026, at 11:59 pm pacific time.

The Family of Faith Scholarship Fund appreciates you taking the time to complete this recommendation. Additional details on the Albert and Hattie Thomas Award of Excellence Scholarship are below. For more details on the Family of Faith Scholarship Fund, please visit our website www.familyoffaithsf.org.

We will maintain the confidentiality of your recommendation and will only share the contents of these materials with our scholarship review committee. If you have any questions, please contact us at info@familyoffaithsf.org.

Sincerely,
Family of Faith Scholarship Fund, Inc.

Albert and Hattie Thomas Award of Excellence $1,500 Scholarship
The Albert and Hattie Thomas Award of Excellence honors both the Patriarch and Matriarch of the Thomas Family. This scholarship will be awarded to a student who not only exceeds expectations in academics but also serves their community. The student will receive $1,500 to use towards their college expenses.

Applicant Name *

First Name Last Name

Recommender Name *

First Name Last Name

Email *

example@example.com

Title *

Please provide your title.

School or Organization *

Please provide the name of the school or organization that you are affiliated with.

Relationship to the Applicant & Length of Time You Have Known the Applicant *

Please provide your rating of the applicant using the scale below with 5 being the highest rating. Use N/A if you are not able to evaluate.

	5	4	3	2	1	N/A
This applicant is actively involved in their community.	○	○	○	○	○	○
This applicant is a role model in their community.	○	○	○	○	○	○
This applicant is a leader among their peers.	○	○	○	○	○	○
This applicant is dependable.	○	○	○	○	○	○
This applicant demonstrates maturity.	○	○	○	○	○	○
This applicant shows great leadership potential.	○	○	○	○	○	○
This applicant shows ambition towards their education.	○	○	○	○	○	○
This applicant exudes good character.	○	○	○	○	○	○
This applicant has made a lasting impact on their community.	○	○	○	○	○	○

Overall Recommendation of Applicant *

Please Select

Please provide any additional comments you have that speak to the applicant's community involvement, leadership, personal character, core values, and examples of service to the community. *

By signing (typing your legal name) in the space below, you are certifying that all information in this recommendation is true and accurate. *