



**Ralph Holback
Beacon of Light Scholarship**

Community Involvement Recommendation Form

Student Details

Please provide this **community involvement** 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 **community involvement** recommendation for a student applying for the Ralph Holback Beacon of Light 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 Ralph Holback Beacon of Light 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.

Ralph Holback Beacon of Light \$1,000 Scholarship

The Ralph Holback Beacon of Light Scholarship honors a faithful servant in Deacon Ralph Holback. This scholarship will be awarded to a student who works hard serving their community, excels academically and is an active member in their church. The student will receive \$1,000 to use towards their college expenses.

Applicant Name *

First Name

Last Name

Recommender Name *

Email *

First Name

Last Name

example@example.com

Title *

School or Organization *

Please provide your title.

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 the applicant.

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 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. *