

The National Court Reporters Association (NCRA) is pleased to offer fifteen \$750 scholarships to students attending an NCRA-approved court reporting program. The Sue Shelton White Scholarship is the top prize of \$1,500. Four additional scholarships are available in the amounts of \$250, \$500, \$750, and \$1,000.

Must be received or postmarked on or before October 1, 2024.

Three recommendation forms are required:

- Two recommendations must be from persons unrelated to the applicant, who will attest to his or her motivation, character, integrity, and educational pursuit.
- One recommendation must be from a faculty member or academic advisor.

This Recommendation Form must be submitted; a letter in its place will not be accepted and the scholarship application will be considered incomplete.

Section A: To be completed by applicant

NAME OF STUDENT			
ADDRESS			
СІТҮ	STATE	ZIP	
STUDENT PHONE	STUDENT EMAIL ADDRESS		
COURT REPORTING PROGRAM	ESTIMATED GRADUATION DATE		

In accordance with the Family Educational Rights and Privacy Act of 1974, you can waive your right to inspect this recommendation by signing the statement below. Should you decide not to waive the right, you will have access to the recommendation only by written request with signature.

Yes, I hereby waive my right of access to this recommendation	eby waive my right of access to this recommendation				
	STUDENT SIGNATURE	DATE			
□ No, I do not waive my right of access to this recommendation.					
	STUDENT SIGNATURE	DATE			
Section B: To be filled out by the recommender					

1. How long have you known this student and in what context?

2. What are the first two words that come to your mind to describe this student?

4. Please rate this student using the following

CRITERIA	Exceptional	Exceeds Expectation	Meets Expectation	Below Expectation	Not Applicable
Academic achievement					
Initiative					
Motivation					
Leadership					
Disciplined work habits					
Intellectual ability (promise)					
Self-confidence					
Dedication					

5. Overall recommendation

□ I recommend the applicant without reservation.

□ I recommend the applicant with reservations. (*Please explain below.*)

\Box I do not recommend the applicant for this scholarship.

RECOMMENDER'S NAME	SIGNATURE	DATE
INSTITUTION/ORGANIZATION NAME	TITLE	
PHONE	EMAIL ADDRESS	

Return the completed Recommendation Form:

This Recommendation Form should be returned by the person making the recommendation. Please email the document and send questions to the Education Department at *schools@ncra.org*. **Must be received or postmarked on or before October 1, 2024.**

This recommendation will remain confidential during the review process and will be destroyed after the award and acceptance of the scholarships. For more information, visit the NCRA CASE Student Scholarship site.