

ACADEMIC REPORT



**UAW Region 9 - Thomas M. Fricano Scholarship Fund
Region 9 United Auto Workers**

*To be completed by the principal, or a teacher or counselor designated by the principal (*see below)*

(COLLEGE Students: Please have completed by college -, information that applies)

(Please print clearly or type)

Name of Scholarship Applicant _____

Name and address of school

Name of person rating the applicant _____

Position _____ Phone number _____
(principal, counselor or teacher & subject/ College Counselor or Teacher)

Applicant's class ranking _____ (number) in class of _____ (number) *if applicable*

Briefly indicate the academic and/or character strengths of the applicant

If applicable, indicate special needs of applicant (scholastic or otherwise)

Examples of special qualities (eg. leadership among peers, etc.)

(Optional) Comments/special circumstances which may be of assistance to scholarship committee in evaluation of the candidate's application

The information noted on this report was obtained from (check all appropriate boxes)

Personal knowledge

Files and records

Faculty comments

Other - Specify _____

DATE: _____

SIGNATURE _____

**Instructions to Principal, teacher, etc. completing this report*

- 1. Please return the completed report to the student as soon as possible. This report must be attached to the student's Scholarship Application and be postmarked to Region 9 UAW at 35 George Karl Boulevard, Amherst, NY 14221, no later than **June 28, 2024***
- 2. Please attach a copy of the student's academic transcript. (high school or college – whichever applies)*
- 3. If you have any questions regarding the completion of this report, please call Darcy Smith in the UAW Region 9 Office at ☎716-632-1540 – Extension 2014.*