



CITIZENS BANK SCHOLARSHIP AWARD RECOMMENDATION FORM

As part of the selection process for the Warren E. Hansen, Sr. Memorial Scholarship Awards presented by Citizens Bank, applicants are required to provide two (2) recommendations. One may be from a faculty or administration member from the applicant's high school and the other a non-relative in the community.

Applicant Instructions: Before submitting this form to the person that you are asking to make a recommendation on your behalf, please complete the *Applicant Information and FEMA Waiver* section. Sign the waiver below if you wish to waive your rights under the Family Education Rights and Privacy (FEMA) Act of 1974.

Respondent Instructions: The person named below is making application for scholarship, and your time and insights will be helpful in the selection process. Please complete the *Recommendation Form* section below. Feel free to use additional sheets if needed to get all your thoughts down. Once complete, forward to the Scholarship Committee using one of contact methods listed on reverse side.

APPLICANT INFORMATION AND FEMA WAIVER

Last Name

First Name

High School

Waiver by Applicant

I have asked _____ to complete the form below on my behalf. I understand my rights under the Family Educational Rights and Privacy Act of 1974 to examine letters received by the Citizens Bank Scholarship Committee. In order to encourage the author to write with candor, I waive the right of access under the FEMA statute to any confidential statement the writer may submit. I understand the execution of this waiver is not a condition for consideration of my application.

Applicant's Signature

Date

RECOMMENDATION FORM

Question 1: How long, and in what capacity, have you known the applicant?

Question 2: In what ways do you feel the applicant has shown leadership and capacity for contribution to their community or school?

Continue to Page 2

Question 3: Based on your personal knowledge of the applicant, what is your evaluation of their character, aptitude, and work habits?

Question 4: Is there any additional information you feel would be helpful in evaluating this applicant as a recipient of a scholarship?

The Scholarship Committee thanks you for taking the time to share your thoughts and insights about the applicant. Please provide the information below before forwarding your recommendation.

Respondent's Signature

Date

Title/Position

Phone Number

Email Address

SUBMIT COMPLETED RECOMMENDATION AND ANY ATTACHMENTS BY APRIL 10, 2026, TO:
scholarship@CitizensBankWI.bank OR MAIL TO COMMUNITY RELATIONS DIRECTOR,
ATTN: SCHOLARSHIP COMMITTEE, P.O. BOX 223, MUKWONAGO, WI 53149

FOR OFFICE USE ONLY

Date Received _____

Applicant Number _____

Recommendation 1 _____

Recommendation 2 _____

Form Updated: 11/10/2026 CAC