



**JUNIOR LEAGUE OF
HAMPTON ROADS**
Women building better communities®

**JUNIOR LEAGUE OF HAMPTON ROADS
2020-2021 VOLUNTEER SCHOLARSHIP APPLICATION
VOLUNTEER SUPERVISOR RECOMMENDATION FORM**

The Junior League of Hampton Roads wishes to recognize young people who have demonstrated an exceptional interest in voluntarism and academic success. As an adult involved directly with _____ [Applicant Student], please complete this form with information regarding this student's volunteer activities. Please include a description of the activity, related responsibilities, time involved, and personal qualities of the student which contributed to her successful community participation.

Name: _____

Title: _____

Agency/Organization:

Address: _____ Zip Code: _____

Telephone Number: _____

DESCRIPTION OF APPLICANT STUDENT'S VOLUNTEER WORK:

___ I hereby authorize the person indicated above to release additional information concerning my volunteer activities. (mark box)

Applicant Student's Signature

Date