

Manager Recommendation Form

General Information:					
Applicant Name:					
Manager Name:					
Manager Title:					
Manager Phone:					
Manager Email:					
Please rate the applicant Average, and 4 = Exceller		ving, where 1	= Poor, 2 = .	Average, 3 :	= Above
	1	2	3	4	NIA
Communication					
Punctuality/Attendance					
Dependability					
Attitude					
Professional Appearance					
Team Work					
Relationship with Peers					
Overall Performance					
How long have you know	the applicant	? Years:	, Mon	ths:	
Please circle your answer MHS Scholarship Prograr		ing. Do you r	ecommend t	he applicant	for the
Manager signature:		Date:			

Please complete and return to: MDMCHRTeam@mhd.com.