

**The Reverend Dr. Martin Luther King, Jr. Scholarship Application
Letter of Reference Form**

DUE DATE: APRIL 28, 2025

1. Name of Applicant:

2. Name of person providing reference:

Address:

City:

State:

Zip Code:

Tel. #:

Email:

3. Please describe the capacity in which you know the applicant and any note-worthy achievements of the applicant:

4. How would you describe the applicant's character?

(Please address traits such as conscientiousness, consideration and concern for others, commitment, follow-through, and personal values).

5. In your opinion why should the applicant receive the Rev. Dr. Martin Luther King, Jr. scholarship?

6. Other comments:

**References may be submit on this form, or a separate letter of reference will be accepted.
Completed applications, including reference forms must be submitted by April 28, 2025.
Without references, the application will be judged incomplete and thereby disqualified.
(This application may be reproduced)**

Please Return Reference Form/Letters to:
Rev. Dr. Martin Luther King, Jr. Scholarship Committee
Box 19
Quinsigamond Community College
670 West Boylston Street
Worcester, MA 01606

Or email to mlkscholarship@qcc.mass.edu