

Employer Reference & Feedback Form

The *Employer Reference & Feedback form* is a tool that provides essential feedback towards the applicant's IGNITE GLOW Scholarship submission.

The IGNITE GLOW Scholarship will award a student that has recently or is currently participating in a work-integrated learning experience. Recipients of the \$2,000 scholarship will be selected based on their explanation of work-integrated learning experience, demonstrates financial need, and submission of the employer reference & feedback form.

Thank you for taking the time to complete this form for the applicant. We value your input and feedback on the applicant's contribution to your organization.

Should you have any questions about the scholarship or employer reference & feedback form, please contact IGNITE at csl@ignitestudentlife.com or visit our GLOW Scholarship for more information.

General Information

Student's Name:	<input type="text"/>	Supervisor name:	<input type="text"/>
Organization:	<input type="text"/>	Supervisor Title:	<input type="text"/>
Department:	<input type="text"/>	Phone number:	<input type="text"/>
		Email:	<input type="text"/>

Outline Roles & Responsibilities

Please share the date of employment and briefly highlight the applicant's role and responsibilities

Performance Feedback

Please share the applicant's overall performance and contributions to the organization

Was this role an unpaid position? YES NO

Would you consider this student for employment in the future? YES NO

Additional comments:

Please share any other comments in reference or support of this scholarship

Supervisor
Signature:

Date:

Student
Signature:

Date: