CHICK EVANS SCHOLARSHIP FOR CADDIES APPLICATION

CADDIE EVALUATION

(Confidential)

Candidate: TYPE or PRINT CLEARLY this section. Then submit to your sponsoring club for completion.

Applicant's name: _____
First Middle Last

Home Address: _____
Number and Street City State Zip Code

High School: _____ Year of Graduation: _____

Sponsoring Country Club: _____

This section of the application for the Evans Scholarship should be completed and signed by a club official. All responses will be kept confidential. Please complete and email to **applications@wgaesf.org** or mail with the required club letter of recommendation to: Scholarship Committee, Western Golf Association Evans Scholars Foundation, 2501 Patriot Blvd., Glenview, IL 60026. The online application and supporting documents (evaluations, letters, etc.) are expected to **be completed by October 15**.

The candidate has compiled the following caddie record:

Year:	No. of Loops:	Comments:	Year:	No. of Loops:	Comments:
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total Years Caddied: _____ **Total Loops:** _____

Rate the applicant's conduct and appearance.

☐ Superior ☐ Excellent ☐ Good ☐ Average ☐ Poor

Rate the applicant's character and reputation for integrity.

☐ Superior ☐ Excellent ☐ Good ☐ Average ☐ Poor

Rate the applicant's reliability and work ethic.

☐ Superior ☐ Excellent ☐ Good ☐ Average ☐ Poor

Rate the applicant's overall commitment to your club.

☐ Superior ☐ Excellent ☐ Good ☐ Average ☐ Poor

In summary, please indicate the overall level of recommendation you wish to give this applicant for the Evans Scholarship.

☐ Highest recommendation ☐ Recommend highly ☐ Recommend ☐ Recommend with reservations ☐ Do not recommend

Required club letter of recommendation: On club letterhead, please comment regarding the applicant's overall record at your club. Include special recognition received, disciplinary action taken and any other factors that should be taken into consideration in reviewing the application.

Name: _____ Title: _____

Telephone Number: _____ Email: _____

Signature: _____ Date: _____