



Empty Saddle Memorial Foundation Reference Form

2011 Empty Saddle Memorial Foundation Reference Form

Empty Saddle Memorial Foundation
1136 14th St SW
Sidney, MT 59270

Please place this completed form in a sealed envelope and sign it across the label and mail it directly to the ESMF

Reference Persons Name: _____ Phone: _____

Scholarship Applicant: _____

The Empty Saddle Memorial Foundation Board of directors decides on scholarships each year. We would appreciate your evaluation of this student. Please give your honest opinion to the following questions.

What is your relationship to the Student? _____

How long have you known the student? _____

Why do you think this person is a good candidate for the ESMF scholarship? _____

What Is Your Opinion of the Academic and Intellectual Potential of This Student? _____

In Addition To Academic and Intellectual Potential, Our Selection Committee Considers:
Financial Need, Community Service & Involvement, and Personal Attributes, e.g., Commitment, Character, Determination, Hard Work, Achievements, Hardships Overcome & Life's Goals.
Please provide us with any further information you may have pertaining to any of these subjects.

