

## LETTER OF REFERENCE

The Fighting Back Scholarship Program recognizes and provides scholarships for individuals who have sustained a life-changing injuries, illnesses, or disabilities and have transformed their lives by means of courage, desire and perseverance to become better people and role models for the rest of us to improve our own lives.

\_\_\_\_\_ has applied for a scholarship from the Fighting Back Program to assist in his/her rehabilitation through 1:1 personal fitness training. In order for us to evaluate each candidate, we need to learn more about them.

How long have you known the candidate? \_\_\_\_\_

Please provide insight into the candidate's character (demonstrating courage, desire and perseverance) and any other information that would help us know \_\_\_\_\_ and why he/she is deserving of this scholarship.

Your name \_\_\_\_\_

Email Address: \_\_\_\_\_

☐ Medical/Healthcare Reference      ☐ Personal Reference

Completed letters can be emailed or mailed to our Scholarship Committee:

Email: [mj@fightingbacksp.org](mailto:mj@fightingbacksp.org)

Mail:

Scholarship Committee

c/o Fighting Back Scholarship Program

PO Box 141

Malvern, PA 19355