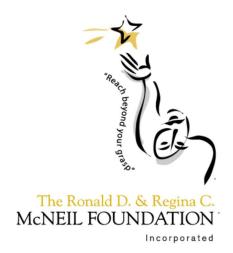
THE MCNEIL SCHOLAR PROGRAM-DETROIT FIRST TIME APPLICANT RECOMMENDATION FORM 2025-2026



Please provide the **Selection Committee** with specific and relevant information including an assessment of the applicant's character, academic strengths and challenges, and educational goals and objectives. Attach your assessment to the Recommendation Form and mail to:

Selection Committee
The McNeil Scholar Program-Detroit
The Ronald D. & Regina C. McNeil Foundation, Inc.
P. O. Box 69
Lake Zurich, IL 60047

Please note that the Recommendations as well as the applicant's official high school transcript must be mailed separate from the applicant's application. Please refer to School Staff Application Guidelines.

All materials must be postmarked no later than midnight April 15, 2025.

THE MCNEIL SCHOLAR PROGRAM-DETROIT **FIRST TIME APPLICANT RECOMMENDATION FORM** 2025-2026



| SCHOLARSHIP APPLICANT | |
|--------------------------|--|
| YOUR NAME | |
| TITLE | |
| PLACE OF EMPLOYMENT | |
| CONTACT PHONE NUMBER (| |
| SIGNATURE | |
| DATE | |