Summer of Service 2019

AmeriCorps Project Conserve

Recommendation Form

For questions, please call 828-697-5777 or email
summerofservice@conservingcarolina.org

Youth Applicant Name:_____ **Grade Level:** _____

School (if applicable):_____

Graduation Date (Anticipated or Actual): _____

Reference Contact Information

Your Full Name:_____

Email Address:_____

Work Phone:_____ **Mobile Phone:** _____

The best way and time of day to reach me is:_____

How long and in what capacity have you know the applicant?_____

After reviewing the attached Summer of Service Fact Sheet, please describe:

1. **Why you think the applicant should be considered for an AmeriCorps Summer of Service position?**

2. **How do you feel this position may benefit the applicant in his or her personal and professional development?**

Please email the completed Recommendation Form to summerofservice@conservingcarolina.org