RECOMMENDATION FORM
2026

Applicant_____ Date_____

Recommender (check one): Teacher_____ Non-Relative_____

I know the applicant: Thoroughly____ Fairly Well_____ Superficially_____

We would like your frank, confidential statement based on your knowledge of the applicant. Please indicate your association with the applicant and the reasons you believe he/she would be a worthy candidate for the Calcot-Seitz Scholarship. Please state how you see the applicant's future in the field of agriculture.

Signature of Recommender _____

Recommender's Name _____
(please type or print)

Mailing Address_____
City State Zip

Please mail completed form to: Scholarship Committee
Calcot-Seitz Foundation
P. O. Box 259
Bakersfield CA 93302

THIS RECOMMENDATION MUST BE POSTMARKED BY MARCH 31, 2026. AN APPLICANT WILL BE DISQUALIFIED FOR CONSIDERATION IF THE RECOMMENDATION IS NOT POSTMARKED BY THE DEADLINE DATE. RECOMMENDATION MAY BE EMAILED TO calcotseitz@calcot.com