

**RUTH FINE MEMORIAL STUDENT LOAN -- 2017 RECOMMENDATION FORM**

Name of Applicant: \_\_\_\_\_

Your Name: \_\_\_\_\_

Title: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Phone(s): \_\_\_\_\_

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

DC Library Association member? [ ] Yes [ ] No

How long have you known the applicant and in what capacity?

\_\_\_\_\_

Please comment on the applicant's ability to complete a graduate degree program and what qualities the applicant has that will contribute to success in the library/information science field. Applicants will be evaluated on commitment to a professional career in the library/information science field, academic background, previous work experience, and financial need. Attach additional sheets as necessary.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please email this form to: [dcla.sfac@gmail.com](mailto:dcla.sfac@gmail.com)

Alternatively, you can send by mail (no mail that requires a signature)

to: Jennifer Manning

7363 Swan Point Way

Columbia, MD

21045

**All applications and supporting materials must be postmarked or emailed by Sunday, April 30, 2017.**