2020 German Summer Study Program for High School Students
"Deutschland Plus"
Need-based Scholarship Recommendation Form

Student’s name ____________________________________________________________

School ______________________________________ City __________ State ______

Your name ______________________________________________________________

Your address _____________________________________________________________

In what capacity do you know the student? __________________________________

__________________________________________________________________________

How long have you known the student? ______________________________________

__________________________________________________________________________

Please comment on the student’s interest in other cultures and/or languages

Why should this student be considered for financial aid?

__________________________________________________________________________

Signature __________________________________________________ Date ____________