



Pearls of Wisdom Foundation Scholarship Application

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Guidance Counselor/Academic Advisor Recommendation Form

This form must be received or postmarked no later than 11:59PM on Monday, April 20, 2026. Completed forms may be submitted via email to poweducation1@gmail.com, or via mail to Pearls of Wisdom Foundation, Inc., ATTN: 2024 Scholarship Committee, P.O. Box 2372, Morristown, New Jersey, 07932-2372.

Student Name: _____

GPA: _____ Class Size: _____ Rank: _____ not ranked

Please evaluate the student in the following categories on a scale of 1 (lowest) to 5 (highest):

Academic Performance	1	2	3	4	5
Intellectual Promise	1	2	3	4	5
Leadership	1	2	3	4	5
Motivation	1	2	3	4	5
Communication/Interpersonal Skills	1	2	3	4	5
Physical Presentation	1	2	3	4	5

Please list 3 words to describe the student:

Counselor/Advisor Name: _____

School Name: _____

Address: _____

Phone: _____ Email: _____

Signature: _____ Date: _____