



## TAHA Inc. Financial Assistance Recommendation Form

**Name \***

First Name      Last Name

**Name of the Student \***

First Name      Last Name

**Email \***

example@example.com

**Phone Number \***

Area Code      Phone Number

**What is your relationship to the student? \***

Teacher, Employer, Community Leader, etc.

**Subjects taught to student (If applicable):**

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Please rate the following attributes of the student based on your experience:

**General behavior**

1   2   3   4   5

Low

High

**Behavior toward peers**

1   2   3   4   5

Low

High

**Behavior toward authority**

1   2   3   4   5

Low

High

**Self-discipline**

1   2   3   4   5

Low

High

**Self-motivation**

1 2 3 4 5  
Low High

**Time management skills**

1 2 3 4 5  
Low High

**Focus on academics**

1 2 3 4 5  
Low High

**Focus on Islamic knowledge and Qur'an**

1 2 3 4 5  
Low High

**Focus on entertainment and gaming**

1 2 3 4 5  
Low High

**Focus on social media**

1 2 3 4 5  
Low High

**Attendance at Mosque or Islamic center**

1 2 3 4 5  
Low High

**Involvement in community activities**

1 2 3 4 5  
Low High

**Overall involvement of parents (if applicable)**

1 2 3 4 5  
Low High

**Focus of parents on academics (if applicable)**

1 2 3 4 5  
Low High

**Please provide some comments on the overall behavior and academic focus of the student and why they should be considered for a TAHA scholarship. \***

**Signature \***

Print or type your name

Please email the completed form to [info@taha.us](mailto:info@taha.us) with the student's name as the subject line.

If you have any questions, feel free to email us or call us at 802-877-8242