

**Lisa Huus Memorial Fund  
reference form**

Name of applicant

\_\_\_\_\_

Name of referee

\_\_\_\_\_

Referee address street

\_\_\_\_\_

City

\_\_\_\_\_

Postal code

\_\_\_\_\_

Referee's occupation

\_\_\_\_\_

Referee signature

\_\_\_\_\_

How long have you know the applicant? \_\_\_\_\_

In what context have you known the applicant?

In making the final selection(s), the committee will consider certain aspects of the applicant (e.g., character, determination, realistic goals, study habits and academic ability). Your assessment and evaluation would be appreciated. Please provide a response.

**Please submit completed forms prior to May 31, 2024 by email to [bursaries@islandkidsfirst.com](mailto:bursaries@islandkidsfirst.com).**