

## Deloitte Foundation and Pace University Accounting Scholars Program Application Recommendation Form

## Two recommendations are required

To be completed by Applicant:	
Name:	U Number:
Email address:	
Signature of Applicant:	Date:
To the Recommender — The applicant has asked that the Deloitte Accounting Scholars Program Scholarship email to <a href="mailto:mgarcia7@pace.edu">mgarcia7@pace.edu</a> or mail to:	
Ms. Maribel Garcia Program Coordinator Accounting Department Pace University 1 Pace Plaza, 4th Floor New York, NY 10038 Phone: (212) 618-6412 Email: deloitte_scholarship@pace.ed	<u>u</u>
If you wish to use a letter or different format, please fe	el free to do so. Thank you for your assistance
Name of Recommender (please print):	
Signature of Recommender:	Date:
Position or Title:	
School or Affiliation:	
Address:	
Telephone: ()	

Email address:

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nat is your overall recommendation for this candida ogram Scholarship and why?	te to receive the Deloitte Accounting	Scho
□ Strongly recommend	□ Recommend	
□ Recommend with some reservation	□ Do not recommend	
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