

**Central Florida Chapter
Association of Legal Administrators
2026 Lynn Osteen Wolfe Memorial Scholarship**

**APPLICANT APPRAISAL
(REQUIRED)**

POSTMARK DEADLINE: February 28, 2026

Last Name _____ First _____ Middle Initial _____

To the Applicant: This section is required and must be completed in the format provided. The section is to be completed by a school counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, you may mail it to the address below. **A letter of recommendation, while welcomed, does not replace this section.**

In a group of 100 other students of comparable age and experience, how would you rate the applicant with respect to the follow characteristics:	Highest 15	Next 20	Middle 25	Lowest 40
This applicant's choice of a post-secondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant can seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills; follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant's ability to communicate (written and oral) is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

In the space below, add any descriptive comment that will assist in providing a complete picture of the applicant's character, attitude, and abilities. Please comment on the applicant's weak and strong points. If possible, please omit any identifying characteristics, such as age, gender or race. (Use additional sheets if necessary.)

Appraiser's Name _____ Title _____ Telephone _____

Signature _____ Organization _____ Date _____

PLEASE MAIL TO: CFCALA Scholarship Committee
C/O Jane Corser
Latham, Luna, Eden & Beaudine, LLP
201 S. Orange Avenue, Suite 1400
Orlando, FL 32801