





**BREWTON CIVIC LEAGUE  
DEMENT HAYS NURSING SCHOLARSHIP REFERENCE FORM**

**FOR (STUDENT):** \_\_\_\_\_

**You are being asked to serve as a reference for the student named above who is applying for the Dement Hays Nursing Scholarship being awarded by the Brewton Civic League.**

**Please give a brief statement regarding each of the following areas. Additional comments may be placed on the back. You may return this letter to the scholarship applicant or you may mail it directly to the address listed below.**

**SCHOLASTIC ABILITY**

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**CHARACTER**

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**FINANCIAL NEED**

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please return to:  
Elizabeth Pugh  
304 Alco Drive  
Brewton, AL 36426

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