ZENIE FOUNDATION

*Helping Students Become Effective Adults*

REFERENCE FORM

Professional references preferred, school or personal accepted. Please be sure to let your references know that the Zenie Foundation may be contacting them on your behalf.

**APPLICANT**

Name:

Address:

Email/Phone:

Today’s Date:

**REFERENCE CONTACT INFORMATION**

1. Name:

Email:

Telephone:

Relationship to Applicant:

1. Name:

Email:

Telephone:

Relationship to Applicant:

1. Name:

Email:

Telephone:

Relationship to Applicant:

This form should be completed and submitted as a PDF with your application package.