

Light of Character Recommendation

Name: _____

Address: _____

The above named person is recommended for the ***Light of Character*** for demonstrating the _____ character trait during the month of _____. He/she has been demonstrated for the following reason(s):

Signature of Referring Person

Date

Light of Character Recommendation

Name: _____

Address: _____

The above named person is recommended for the ***Light of Character*** for demonstrating the _____ character trait during the month of _____. He/she has been demonstrated for the following reason(s):

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