# NYLT Letter of Recommendation

**NYLT Session:** WINTER 2023

**Scout's Name: _____Unit:_____**

**Unit Leader: _____**

*The information on this form will not be shared with the scout & will not impact them negatively. Please be honest in your answers.*

**Based on your experience, rate the Scout on a scale of one to five (with five being the highest):**

| | 1 | 2 | 3 | 4 | 5 | Comments: |
|---|---|---|---|---|---|---|
| Trustworthy | | | | | | |
| Loyal | | | | | | |
| Helpful | | | | | | |
| Friendly | | | | | | |
| Courteous | | | | | | |
| Kind | | | | | | |
| Obedient | | | | | | |
| Cheerful | | | | | | |
| Thrifty | | | | | | |
| Clean | | | | | | |
| Brave | | | | | | |
| Reverent | | | | | | |

**Please describe their leadership style by checking the box next to the most appropriate phrase.**

1. Shy & quiet ☐ Outgoing ☐
2. Developing Leader ☐ Demonstrated Leader ☐ Hidden Talent waiting to be tapped ☐
3. Takes charge w/o be asked ☐ Hides when there's work to be done ☐ Waits to be asked ☐
4. Prefers others the same age ☐ Gets along well with Scouts of all ages ☐

**What other information would you like to share with us about the Scout you are recommending that you feel we should know?**

_____

_____

**Signature** _____ **Date** _____