



KVC[®]
West Virginia
We all need connection.

First Star Academy Adult Recommendation Form

We're so pleased you're interested in the First Star Academy program and that you have a student to recommend! This form will just take a few moments to complete. We're looking forward to learning a little more about you and the potential First Star Scholar!

This form and the Scholar Interest form must be submitted before the Academy Director can begin the review process. If your student hasn't already done so, please send them the Scholar Interest form so they can complete it. After submitting this form, the Academy Director will contact you with next steps. Thank you!

Fields marked with (*) are required.

Student's Name* _____

Your Name* _____

Your Email Address* _____

Your Phone Number _____

What are your preferred pronouns?*

- She/Her
- He/Him
- They/Them
- No Preference
- Not listed

If you have a professional relationship with the student, please list your organization and role.* (Are you a social worker, attorney, CASA, community member, counselor/therapist, or school official?)

How do you know this student and how long have you known them?*



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What are 2-3 strengths you believe the student will bring with them to the program?*

How did you hear about the First Star Academy?*

- Visited the KVC website
- Visited the First Star website
- Facebook, Instagram
- Heard about it from a current First Star scholar or Academy staff
- Referred by a case worker
- Heard about it from a caregiver
- Not listed

The information I have presented in this recommendation form is accurate and honest and has solely been written by me.*

Signature _____

Date _____