

Scholarship Recommendation Form

Instructions: Thank you for being a recommender for the PCAFPD scholarship. Recommendations are used as part of the selection process. Please type your information below and provide a digital copy to the applicant for submission. Hand written responses will not be accepted.

Recommender Information

Name: FARWIDA S. ABDURASID

Relationship to applicant: FORMER STUDENT

Organization/School: GUMDULUNGAN NHS

Email address: farwida.abdurasis@deped.gov.ph.

Applicant Information: Use additional pages as needed

Name: DAUD, HAMID S.

Current School: MINDANAO STATE UNIVERSITY - MAGUINDANAO

Recommendation

PCAFPD scholars are chosen on the basis of their financial need, academic performance, and commitment to community service and leadership. As the applicant's reference, please describe the applicant's demonstrated leadership skills, accomplishments, and impacts on your community and any other relevant information you feel the committee should know about the applicant.

Recommender Name & Signature: FARWIDA S. ABDURASID
Date: 09-10-25