

## YOUTH BOARD RECOMMENDATION

## AN URBAN YOUTH ENRICHMENT PROGRAM

ACADEMIC SUPPORT

COLLEGE ACCESS & SUCCESS

SQUASH INSTRUCTION

LITERACY ENRICHMENT

COMMUNITY SERVICE

MENTORING

Student's Name:	
Recon	nmender's Name and Title:
Agenc	ey or School Name:
Agenc	ey or School Address:
Phone	e #:
Email:	
I hereb	by certify that the above named student:
	Is a student at:
	Is between the ages of 16-18 years old, and is currently enrolled in high school
relatio	e <u>attach a recommendation letter</u> describing the nature of your onship to the applicant and why he/she would be a good candidate for reetSquash Newark Youth Board.
Signat	ture:
Date: _	<del></del>
	s of recommendation can be sent to StreetSquash Newark or emailed thboard@streetsquashnj.org.

STREETSQUASH HARLEM

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