MEDICAL CITY DECATUR JUNIOR VOLUNTEER PROGRAM 2023 LETTER OF RECOMMENDATION

HOW LONG HAVE YOU KNOWN APPLICANT?

You have been asked to provide a letter of recommendation for the above mentioned applicant. Please provide your input as to why you believe this applicant would be appropriate as a teen volunteer at Medical City Decatur. Must be received by MCDC no later than 4:00pm on April 10th.

Use back of sheet, if needed.