



**SUIT YOURSELF
FACULTY/STAFF RECOMMENDATION FORM**

STUDENT NAME: _____

STUDENT U#: _____

I hereby recommend the above-mentioned student for the following: Please check one

_____ Suit Yourself Program

_____ Suit Yourself Emergency Program

I hereby attest that I have verified that the student is Pell eligible and possess low level of personal assets. The student is unable to purchase professional clothing needed to compete successfully with others in the job market.

Or

I have verified that the student is in need of emergency assistance based on an immediate need that I have verified.

Faculty/Staff Printed Name

Faculty/Staff Signature

Department

Title

Email Address

Extension

Please return completed forms to Career Services at 400 Wilder Tower or
careerservices@memphis.edu.