

REQUEST FOR REFERENCE 2007

Barn Aide, Buddy Up, Camp Aide, CIT, Dream Worker

APPLICANT- PLEASE FILL OUT TOP SECTIONS



Girl Scouts®
Where Girls Grow Strong™

NAME OF APPLICANT: _____

CAMP APPLYING TO: _____ PROGRAM _____

Thanks for your honest assessment of this applicant's qualifications. Our program requires responsible, mature young women who are creative and flexible, function well as part of a team and are able to maintain stamina over a long period of time. Each young woman participating in a leadership program must be able to work well with children and adults and accept supervision. We are committed to accepting the best possible camp leaders-in-training and appreciate your immediate and honest response.

Girl Scouts of Swift Water Council
PO Box 10832
Bedford, NH 03110
800-654-1270, 603-627-4158
Fax- 603-627-4169
www.swgirlscouts.org

This section to be filled out by the applicant

I, _____, have given your name as a reference in applying for a position as _____ at a GS of Swift Water Council Camp. I agree to release you, your firm, or corporation from any liability for information you may provide.

Signed: _____ Date: _____

How long and in what capacity have you known the applicant?

If you had a child going to camp, would you feel confident with the applicant providing supervision? Why or Why not?

Please rate and comment on the applicant's skill using the scale below.

	RATE					COMMENTS
	1 being poor; 5 being excellent					
Teamwork	1	2	3	4	5	_____
Maturity	1	2	3	4	5	_____
Responsibility	1	2	3	4	5	_____
Flexibility	1	2	3	4	5	_____
Initiative	1	2	3	4	5	_____
Creativity	1	2	3	4	5	_____
Ability to work and live in a diverse community	1	2	3	4	5	_____

Please note: additional questions on reverse side

The camp atmosphere is intense. It is personally and physically demanding. How do you believe the applicant will respond to the stress of this kind of position?

What are the applicant's five most outstanding qualities/skills?

Do you have any hesitation about the applicant working with children? If yes, why?

What will she be able to contribute to the camp community?

Signature _____ Date _____

Print Name _____ Phone # _____

Title _____

Street _____ City _____ State _____ Zip _____

Thank you very much for taking the time to complete this reference.

**Please mail this form to:
Girl Scouts of Swift Water Council,
PO Box 10832, Bedford, NH 03110.
You may also fax it to 603-627-4169.**