

<p>Camp Holloway Director Email: CampHolloway@gsmidtn.org Phone/Fax: (615) 460-0212</p>	<p>Camp Sycamore Hills Director Email: CDirector@gsmidtn.org Phone/Fax: (615) 460-0239</p>
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INSTRUCTIONS FOR THE APPLICANT: Please read and sign this section before giving it to your reference writer. You will need three (3) references. Please make copies of the one provided.

I am applying for the position of _____ at Camp (name) _____.

I, the undersigned, have agreed to waive my right to read this reference.

Print Name: _____ Signature: _____ Date: _____

INSTRUCTIONS FOR THE REFERENCE WRITER: This person has applied for a seasonal camp staff position with Girl Scouts of Middle Tennessee and has selected you as a reference. The applicant has waived the right to see your response, and we appreciate your honest evaluation. Feel free to include a personal note of recommendation if you wish. Please indicate N/A for any questions you feel have not observed.

After completing this form, please place it in an envelope and sign your name over the sealed outside flap, and return to Girl Scouts of Middle Tennessee. If you prefer, you may mail, fax, or email the form directly to the camp director at the address. Feel free to call us at the number above if you have any questions. **Thank you for your time and valued assistance.**

Questions *(Please answer the following questions and give careful consideration to each. Attach an additional sheet if needed.)*

1. How long have you known the applicant? _____
2. In what capacity? _____
3. Please check the box that best reflects the applicant's leadership ability:
 prefers to follow makes some effort to lead good ability to lead exceptional ability to lead
4. How does the applicant respond to directions?

5. How well have you witnessed the applicant working with others for the good of the group?
 cooperates grudgingly; makes trouble limited cooperation; own interest takes priority
 cooperates willingly and actively exceptionally successful in working with others
6. What strengths and talents do you think the applicant will bring to camp?

7. Most positions are live-on positions that require a 24 hour / 6 day a week commitment and can be high stress. Camp requires attention to detail, stress management, and taking care of oneself. What can you share about the success the applicant would have in this type of environment and how would they cope?

8. All staff members face challenges during their time at camp. What difficulties do you think the applicant would be most likely to encounter if selected to be a staff member, based on his or her unique challenges?

Applicant Name: _____

9. Would you want your own child (or any child for whom you are responsible) placed under the direct charge, influence, and care of the applicant? If not, please explain.

10. No one applicant will excel in all areas listed below. Please candidly evaluate the applicant based on your observed knowledge using the following scale: **5 = Excellent** **4 = Above Average** **3=Average** **2 = Below Average** **1 = Lacking**

- _____ Uses positive reinforcement rather than negative criticism of children
- _____ Uses appropriate chain of command in solving problems
- _____ Can be flexible and adjust to new and changing situations
- _____ Reacts calmly and sensibly during times of stress
- _____ Works cooperatively with others
- _____ Expresses a sense of humor
- _____ Fulfills responsibilities without requiring excessive amounts of reassurance and praise
- _____ Demonstrates a sense of caring for and responsibility of others
- _____ Practices effective listening and communications skills
- _____ Is perceptive to situations going on in his/her surroundings
- _____ Is highly motivated individual
- _____ Demonstrates good judgment in decision making
- _____ Serves as a positive role model for children by exemplifying high standards of integrity and personal character

11. Would you consider this person for employment? Yes No

12. In what ways would the applicant grow and develop in a camp position?

13. Additional comments:

14. If needed, may we contact you for further information? Yes No

If yes, what is the best method of contacting you?

Phone: _____ Email: _____

Signature Authorization

Reference Name: _____

Mailing Address (Street, Apt. #): _____ City: _____ State: _____ Zip: _____

To the best of my knowledge, all statements made or indicated on this Reference Form are true and represent my honest appraisal of the qualifications of the applicant.

Signature: _____ Date: _____