

REFERENCE FORM

\_\_\_\_\_ is applying as a camp counselor at 4-H Camp this summer. The camp counselor selection committee would like your input about the qualities and ability to fulfill the responsibilities of a counselor. The information you include will not be shared with the applicant. Please complete this reference form based on *your* knowledge and/or observations. Thank you for your help.

1. Please mark how you would evaluate the applicant's qualities, using this scale:

|  | Excellent | Good | Fair | Poor | Not Known |
|--|-----------|------|------|------|-----------|
| Responsibility                             |           |      |      |      |           |
| Communication skills                       |           |      |      |      |           |
| Respect for others                         |           |      |      |      |           |
| Dependability                              |           |      |      |      |           |
| Enthusiasm                                 |           |      |      |      |           |
| Flexibility                                |           |      |      |      |           |
| Patience                                   |           |      |      |      |           |
| Initiative                                 |           |      |      |      |           |
| Resourcefulness                            |           |      |      |      |           |
| Ability to work with children (age 5-10)   |           |      |      |      |           |
| Ability to work with children (ages 11-14) |           |      |      |      |           |
| Ability to work with other teens           |           |      |      |      |           |
| Ability to work with adults                |           |      |      |      |           |

2. Please write any additional comments here:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please return no later than October 1, 2019.**

**Please note:** Please submit in a sealed envelope. For questions contact the OSU Extension Office at 419-586-2179.

Beth Guggenbiller  
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