

BLUE RILL DAY CAMP

444 Saddle River Road
Airmont, NY 10952

Phone: 845-352-3521
Fax: 845-352-0168
staff@bluerilldaycamp.com

Staff Reference Form

Please take a moment to fill out the following reference form and return it to us via mail or email to staff@bluerilldaycamp.com.
Please be advised that we may be in contact with you to verify this reference. Thank you for your help.

Blue Rill Applicant's Name: _____ Today's Date: _____

Your Name: _____ Title: _____

Email: _____ Best Phone # to reach you: _____

Address: _____

Please state your relationship to the applicant: _____

How long have you known him/her? _____

Have you seen the applicant work with children? If so, under what circumstances? Please describe what you have observed.

Working at camp is physically and emotionally demanding. Please discuss how you feel the applicant will manage in a challenging situation.

Please review the following and rate how well the applicant demonstrates each quality by circling the corresponding number:

	Poor				Excellent	
Judgment	1	2	3	4	5	N/A
Cooperation	1	2	3	4	5	N/A
Responsibility	1	2	3	4	5	N/A
Relating with Children	1	2	3	4	5	N/A
Leadership	1	2	3	4	5	N/A
Working Well with Others	1	2	3	4	5	N/A
Taking Initiative	1	2	3	4	5	N/A
Reliability/Dependability	1	2	3	4	5	N/A
Flexibility	1	2	3	4	5	N/A
Enthusiasm	1	2	3	4	5	N/A
Creativity	1	2	3	4	5	N/A
Professionalism	1	2	3	4	5	N/A
Effectiveness at Duties	1	2	3	4	5	N/A
Friendliness	1	2	3	4	5	N/A
Uses Common Sense	1	2	3	4	5	N/A

How likely would you be to hire/rehire the applicant? very somewhat unsure unlikely not applicable

Would you want the applicant to be your child's counselor? absolutely probably unsure unlikely no

If you have additional comments you feel are pertinent to the applicant, please write on the back of this form or attach your comments.