

CONFIDENTIAL REQUEST FOR REFERENCE



4806 Seton Drive, Baltimore, MD 21215
Phone: 410.358.9711 Toll Free: 1.800.492.2521
Fax: 410.358.9918 www.gscm.org

Girl Scouts of Central Maryland thanks you for your honest assessment of this applicant's qualifications. Our programs require responsible, mature candidates, 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 Leadership Camper must be skilled at group living and must be able to work well with children, peers and adults in all kinds of situations. We are committed to providing the best possible camp leadership program and appreciate your immediate and honest response.

THIS SECTION TO BE COMPLETED BY APPLICANT:

I, , have given your name as a reference in applying for a leadership camper position as at a Girl Scout of Central Maryland summer camp. I agree to release you, your firm or corporation from any liability for information you may provide.

SIGNATURE: DATE:

COMMENT ON THE FOLLOWING:

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

If you had a child going to camp, would you like the applicant to be their counselor? Why or why not?

RATE AND COMMENT ON THE APPLICANT'S SKILL USING THE SCALE BELOW:

SKILL:	RATE (1-Poor; 5-Excellent)	COMMENTS:
Teamwork	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Maturity	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Responsibility	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Flexibility	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Initiative	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Creativity	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____
Ability to work and live in a diverse community	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	_____

ADDITIONAL QUESTIONS ON REVERSE SIDE |

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The camp environment is rustic with few creature comforts. It is also personally and physically demanding. How do you believe the applicant will respond to the physical, emotional, and environmental demands of this course?

Please list and describe the applicant's 3 most outstanding qualities and/or skills.

Do you have any hesitation about the applicant working with children 24 hours a day? If yes, why?

Why should we accept this person? What will they be able to contribute to our camp community?

What advice would you give to the applicant's Leadership Counselor/ Mentor at camp?

SIGNATURE:	<input type="text"/>	DATE:	<input type="text"/>		
PRINT NAME:	<input type="text"/>	PHONE NUMBER:	<input type="text"/>		
TITLE:	<input type="text"/>	E-MAIL:	<input type="text"/>		
STREET:	<input type="text"/>	CITY:	<input type="text"/>	STATE/ZIP:	<input type="text"/>

THANK YOU VERY MUCH FOR TAKING THE TIME TO COMPLETE THIS REFERENCE.

**PLEASE RETURN THIS FORM TO:
GIRL SCOUTS OF CENTRAL MARYLAND
4806 SETON DRIVE, BALTIMORE, MD 21215
FAX: 410.358.9918 OR EMAIL KBOZARD@GSCM.ORG
ATTN: CAMP CIT/WIT II PROGRAM**