SEASONAL EMPLOYMENT REFERENCE FORM
Longs Peak Council - Boy Scouts of America

Applicant's Name: ________________________________________________________________
Camp Name: ________________________________________________________________
Position Applying For: ________________________________________________________

This individual is applying for employment in a position with a camping program of the Longs Peak Council. Camp staff size can number as many as 75 individuals with as many as 500 campers each week. Some positions are for periods of several days, or as many as ten weeks. The success of all operations, and the enjoyment of the campers, is extremely dependent upon the quality of the staff employed. It is important that mature, competent, and positive role models fill all camp staff positions. Your frank evaluation of this applicant will be greatly appreciated. Please complete and return this reference at your earliest convenience. Please use the reverse side of this form to make any additional comments.

How well do you know this applicant?
____ Very Well  ____ Rather Well  ____ Casually  ____ I do not know this person

Circle the words that best describe the applicant's behavior:

ATTITUDE: Enthusiastic  Positive  Acceptable  Negative
DEPENDABILITY: Exceptional  Usually  Sometimes  Irresponsible
SPEAKING: Eloquent  Very Fluent  Satisfactory  Limited Ability
LEADERSHIP: Take Charge  When Asked  When Directed  Follower
APPEARANCE: (Grooming & Dress) Flawless  Well-groomed  Usually Neat  Slovenly
INITIATIVE: Self-motivated  Hard Worker  Some Drive  Lazy
COMMON SENSE: Always Sound  Usually Sound  Needs Direction  None
INTEGRITY: Trustworthy  Usually Reliable  Lacking  Can Not Trust
PERSONALITY: Magnetic  Outgoing  Pleasing  Bland
TEAMWORK: Team Player  Cooperative  Independent  Obstructionist

Would you trust the care of your children to this individual?
____ Yes  ____ No

RECOMMENDATIONS:
_____ Highly Recommend Employment
_____ Recommend Employment
_____ Do Not Recommend Employment

Signature:_______________________________________ Date:____________________

Please Print Name:_____________________________________________________________________
Telephone Number: (H)_________________ (B)__________________ (C)___________________
E-Mail Address:________________________________________________________________________

Mail to: Longs Peak Council, BSA
P.O. Box 1166
Greeley, CO  80632-1166