



Camp John Knox

Summer Camp Staff Reference Form

Applicant's Name _____ Position _____

Reference's Name _____

Daytime Phone _____ Evening Phone _____ Most convenient time to call _____

How long have you known the applicant? _____ In what capacity? _____

Please answer the following questions on a scale of 1-10 (1= lowest and 10 = highest. Please feel free to elaborate on your answers in the space given or on a separate sheet of paper.)

What are the applicant's two greatest strengths? _____

What are the applicant's two greatest challenges? _____

Rate the applicant's level of:

Responsibility _____

Self-Motivation _____

Communication skills _____

Friendliness _____

Flexibility _____

Enthusiasm _____

Spiritual Maturity _____

Professionalism _____

Leadership skills _____

Resourcefulness _____

As a member of the Camp John Knox staff the applicant will spend a great deal of time working with children of all ages and working closely with the staff in a residential environment. For more detailed information about our program visit our web site at www.johnknoxcenter.org. Please answer the following questions in as much detail as possible.

How well do you feel the applicant will operate within our program? _____

Why would you be willing to allow the applicant to supervise your child for one week in the camp setting? _____

Do you feel confident in the applicant's ability to be a role model to children of all ages? _____

List any skills or abilities of the applicant you feel would benefit them if hired. _____

- ____ I recommend the applicant without hesitation.
- ____ I recommend the applicant with reservations.
- ____ I do not recommend the applicant.

Reference Signature _____

Date _____

Please return this form and any additional information to:

JOHN KNOX CENTER
Summer Camp Staff Reference
591 W. Rockwood Ferry Road
Ten Mile, TN 37880
Phone (865) 376-2236
Fax (865) 376-1719