



### STAFF REFERENCE FORM



PLEASE COMPLETE AND RETURN TO:  
**CAMP WINADU**  
 3 New King Street • White Plains, NY 10604  
 Phone: 914-607-3617  
 Fax: 914-422-3635

REFERENCE FOR: \_\_\_\_\_

POSITION OR SKILL AREA APPLYING FOR: \_\_\_\_\_

THE ABOVE NAMED PERSON IS APPLYING TO WORK AT A U.S. SUMMER CAMP FOR CHILDREN. THIS REFERENCE WILL AID IN THE HIRING DECISION. SINCE WE WISH TO HIRE PEOPLE WITH PROVEN ABILITY AND EMOTIONAL STABILITY, WE WOULD APPRECIATE YOUR FRANK OPINION. WE WISH TO THANK YOU IN ADVANCE FOR YOUR COOPERATION AND ASSURE YOU THAT YOUR INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE.

|                                     | SUPERIOR |     | AVERAGE |     | POOR |     |
|-------------------------------------|----------|-----|---------|-----|------|-----|
|                                     | HIGH     | LOW | HIGH    | LOW | HIGH | LOW |
| ABILITY TO TEACH ABOVE SKILL        |          |     |         |     |      |     |
| WARMTH AND LIKING OF CHILDREN       |          |     |         |     |      |     |
| UNDERSTANDING THE NEEDS OF CHILDREN |          |     |         |     |      |     |
| ABILITY TO BE FAIR — NOT PARTIAL    |          |     |         |     |      |     |
| IMAGINATION AND ENTHUSIASM          |          |     |         |     |      |     |
| ABILITY TO GET ALONG WITH OTHERS    |          |     |         |     |      |     |
| HEALTH, ENERGY AND ENDURANCE        |          |     |         |     |      |     |
| ABILITY TO ACCEPT RESPONSIBILITY    |          |     |         |     |      |     |
| WILLINGNESS TO LEARN                |          |     |         |     |      |     |
| LEADERSHIP SKILLS                   |          |     |         |     |      |     |
| PERSONAL APPEARANCE                 |          |     |         |     |      |     |
| MATURITY COMPARED TO PEERS          |          |     |         |     |      |     |

How comfortable would you be placing your child in the applicants care? Very Comfortable\_\_\_ Comfortable\_\_\_ Uncomfortable\_\_\_

To the best of your knowledge has the applicant ever been investigated for allegations of child abuse?\_\_\_\_\_

To the best of your knowledge has the applicant ever been convicted of a felony?\_\_\_\_\_

Is there any reason you are aware of that this person should not work with children?\_\_\_\_\_ (if yes, please use the reverse side of form to explain)

How do you know the applicant?\_\_\_\_\_ For how many years?\_\_\_\_\_

Your name:\_\_\_\_\_ Position:\_\_\_\_\_ Organization\_\_\_\_\_

Signature:\_\_\_\_\_ Address:\_\_\_\_\_ Phone:\_\_\_\_\_