



Camp Lau-Ren



VOLUNTEER COUNSELLOR REFERENCE

Applicant's (Counsellor's) Name: _____

Name of Reference: _____

Address of Reference: _____

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

How do you feel about this person providing care to children in a residential camp setting?

What special skills, knowledge or attitude would this person bring to our camp?

Please comment on the applicant's ability to handle stressful situations. _____

Please rate the applicant on the following by checking appropriate box:

	<i>ABOVE AVERAGE</i>	<i>AVERAGE</i>	<i>BELOW AVERAGE</i>
Leadership skills			
Reliability			
Communication skills			
Ability to work in a team			
Ability to accept feedback			
Relationship with peers			
Dependability			

Please describe the applicant, i.e., energetic, outgoing, enthusiastic, impatient, irresponsible, etc.

Other comments you feel are relevant to this application:

Signature _____ Date: _____

All information provided to Camp Lau-Ren is used only by Camp Lau-Ren. By filling out this form, you offer us an insight into applicants and their abilities that will help us to make an informed decision for staffing. Access to information provided on this form is restricted to the Camp Lau-Ren Co-Ordinators and Directors.

Return completed form to: Ron & Joanne Hartnett, Co-Ordinators, Camp Lau-Ren, 89 Short Road, Amprior, Ontario K7S 3X9.