



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA CAMP LAKEWOOD
13528 State Highway AA, Potosi, MO 63664
Phone: 573-438-2155
Fax: 573-438-3913
www.camplakewood.org

2021 CIT REFERENCE FORM YMCA CAMP LAKEWOOD

TO THE APPLICANT: Give out the attached Reference Form to two professional and one social contact. Employers, teachers, coaches, etc. are acceptable as professional references; and a parent, grandparent, aunt, uncle, longtime family friend, etc. is acceptable as your social contact. Your reference must mail, e-mail, or fax their form directly to camp. **We cannot complete the interview process until all 3 references have been turned in as well as your essay and application.**

Applicant's Name: _____

The person above is applying for our Counselor-in-Training (CIT) Program. We are anxious to profit from your observations of him or her. You can be of considerable assistance to us in determining the applicant's ability to meet our standards for youth work. CITs require emotional maturity, proven leadership ability and sensitivity to the challenges youth face in today's world. Basic character and attitude are more important to us than work experience. If successful, the applicant will be working closely with children entrusted to our care. Please be honest and prompt with your evaluation, which will be kept in confidence.

What is your relationship to the applicant? _____

How well do you know the applicant? ___ Very Well ___ Well ___ Casually

How long have you know this applicant? ___ Years ___ Months

Please rate the applicant to the best of your knowledge with respect to each of the following (check mark):

	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NOT SURE
Emotional maturity	___	___	___	___
Communication skills	___	___	___	___
Leadership ability	___	___	___	___
Concern for others	___	___	___	___
Cooperation skills	___	___	___	___
Ability to relate to youth	___	___	___	___
Responsibility	___	___	___	___
Personal initiative	___	___	___	___
Integrity	___	___	___	___
Patience	___	___	___	___
Respectful	___	___	___	___
Positive role model	___	___	___	___
Positive attitude	___	___	___	___
Energetic	___	___	___	___
Problem-solving skills	___	___	___	___

1. What are this individual's greatest needs for development?

2. What are this individual's strengths?

3. If you are a parent or had child(ren), would you leave your children in the applicant's care? Why or why not?

4. Would you want this person to be on your staff? Why or why not?

5. Is there any reason this individual should NOT work with children?

Please check one of the options regarding this applicant:

Highly Recommend Recommend Not Recommend

Signature: _____

Print Name: _____

Title: _____

Phone: _____

E-mail: _____

Date: _____

Thank you for your time and assistance. **BY APRIL 26, 2021**, Please return this form by mail, e-mail, or fax to:

Address: YMCA Camp Lakewood, 13528 State Hwy AA, Potosi, MO 63664

E-mail: camplakewood@gwrymca.org

Fax: 573-438-3913

For any questions, please contact us at 573-438-2155