

## MINNESOTA NATIONAL GUARD YOUTH CAMP

## **Reference Form**

Revised Feb 2017

1360 University Ave West Box 132 St. Paul, Minnesota 55104-4086 Phone: (763) 670-1257

Applicant's Full Name (print please):		,						
Instructions:								
Camp Applicant: Please fill in hyour name above and give a copy of this form to three(3) references. (Please do not use family members)								
Applicant's Reference: The above individual is volunteering for a position with the Minnesota National Guard Youth Camp. As a part of the Youth Staff, it is very important that eah individual demonstrates a mature attitude toward leadership and a responsible concern for the safety and welfare of the children in our care. Please rate this person as accurately and honestly as possible. Your responses will be kept confidential. Send your form to the address on the letterhead.  Thank You!								
PERSONAL REFERENCE	Evenliont	Vory Good	Good	Eair	Poor	No Info		
Please rate the individual on the items below:  LEADERSHIP:	Excellent	Very Good	Good	Fair	Poor	NO INTO		
Easily takes on the role of a leader and motivates others.		$\circ$	$\circ$	0	0	$\circ$		
RESPONSIBILITY: Capable of making decisions that reflect good judgment.		$\bigcirc$	$\bigcirc$	$\bigcirc$		$\bigcirc$		
<b>DEPENDABILITY:</b> Completes work with minimal supervision safely and in a timely manner.		$\bigcirc$	$\bigcirc$	$\bigcirc$	0	$\bigcirc$		
INTEGRITY: Displays convictions to a positive set of values.	0	$\circ$	0	0	0	0		
MATURITY: Exhibits a positive attitude when dealing with interpersonal relationships.	0	$\circ$	0	0	0	0		
FLEXIBILITY: Adapts to new assignments quickly and easily.	0	0	0	0	0	0		
COOPERATIVE: Shows willingness to work as a team member	0	$\circ$	0	0	0	$\circ$		
STRESS: Tolerates emotional and stressful situations with clear thinking and confidence.	0	$\circ$	0	0	0	$\circ$		
CRITICISM:  Responds openly and positively to feedback.						$\bigcirc$		



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Applicant's Full Name (print please):									
NARRATIVE COMMENTS:									
Please comment on the applicant's suitability and readiness to work as a youth leader.									
Are you aware of any emotional or chemical dep performance?  O YES  O NO  Explain in YES:		·		job					
How long have you known the applicant?									
What is your relationship with the applicant?	OFRIEND	OEMPLOYER	ORELATIVE	OTHER					
Your Name:			Title:						
Organization:			Phone:						
Address:									
Street	Ci	ity	State	Zip					
Signature:			Date: :	Month/Day/Year					

Thank you for your time and cooperation