

**CAMP WRIGHT 400 Camp Wright, Stevensville, MD 21666 Phone 410.643.4171 Fax 410.643.8421**  
**E-mail: associatedirector@campwright.com**

This Reference request is for: \_\_\_\_\_

Dear Madam or Sir:

I would appreciate your assistance. The person listed above has applied to work at Camp Wright this summer and used you as a personal or work reference. Please take a couple of minutes to answer a few questions about this person in regards to their skills and abilities as they apply to the position listed above. Thanks for your help and input. It is important to have honest and accurate information to evaluate this person's skills and whether or not they are an appropriate person for work with children in a camp environment. This information becomes part of the file of this person.

**Thank you for your help in this matter.** Your timely and honest answers are appreciated and valued. Use the back of this sheet if extra space is needed. An envelope is enclosed for your convenience or this may be faxed to 410 643 8421

Julia L. Connelly  
Associate Director

1. How long have you known this person and in what capacity? \_\_\_\_\_
2. If it was a work relationship, what was their job title(s), \_\_\_\_\_, and would you rehire this person? YES NO
3. Does this person have the maturity and ability to function well in a camp setting with children and young adults? \_\_\_\_\_  
Explain: \_\_\_\_\_

4. Please rate their performance/skill: 5=excellent, 3=average, 1=poor, NA=not applicable. **Please circle answers.**

A. Work and discipline habits	1	2	3	4	5	NA
B. Ability to work well with children	1	2	3	4	5	NA
C. Ability to work well with peers	1	2	3	4	5	NA
D. Ability to work with supervisor or authority figure	1	2	3	4	5	NA
E. Ability to respond to emergencies or pressure situations	1	2	3	4	5	NA
F. Ability to listen to and follow directions	1	2	3	4	5	NA
G. Emotional stability	1	2	3	4	5	NA
H. Overall recommendation as a camp staff member	1	2	3	4	5	NA

5. Would you like a Camp Wright representative to call you about this candidate? YES NO
6. Do you know or have reason to know that this individual has ever engaged in sexual misconduct\*? YES NO  
If YES, please clarify about the possibility that the applicant has engaged in sexual misconduct: \_\_\_\_\_

7. Other comments about this applicant: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

\*Sexual misconduct is defined as sexual abuse or molestation of any person, including but not limited to, any sexual involvement or sexual contact with a person who is a minor or who is legally incompetent; or sexual harassment in a situation where there is employment relationship between persons involved, including but not limited to sexually oriented humor or language; questions or comments about sexual behavior or preference unrelated to employment qualifications; undesired physical contact; inappropriate comments about clothing, appearance; or repeated requests for social engagements; or sexual exploitation, including but not limited to, the development of or the attempt to develop a sexual relationship between a cleric, employee or volunteer and a person with whom he/she has a pastoral (or supervisory) relationship, whether or not there is apparent consent from the individual.

**\*\*Thank You!\*\***