

**YMCA of McHenry County – Camping Services
Reference Request Form**

Applicant: Please complete top section before giving to reference.

TO: _____ FROM: Graham Little,
(Person from whom you are requesting a reference) Director of Camping Services

Applicant name: _____ has applied for a staff position with YMCA of McHenry County – Camping Services and has given your name as a reference.

I, _____ give permission for _____
(Applicant name) (Reference)

to release to YMCA of McHenry County – Camping Services information regarding past work performance and assessment of qualifications for desired position.

The goal of YMCA of McHenry County – Camping Services is to provide campers with a quality recreational outlet and an opportunity to learn new social skills. Staff are expected to deal with a wide range of group and individual behavior, have a variety of leadership skills, and work very closely with other staff and with campers.

Your assessment of this applicant's readiness for such an experience is vital to any hiring decision. Your prompt attention to this matter will be greatly appreciated. Please rate the applicant on the following characteristics with **1 being poor** and **5 being excellent**. Feel free to comment as appropriate. **Please complete both sheets of this form.** Be sure to sign your completed evaluation. Thank you for your time.

Characteristic	5	4	3	2	1	Specific Comments
Poise & Self Confidence						
Ability to take direction/supervision						
Dependability						
Flexibility						
Energy						
Maturity						
Judgment						
Leadership						
Honesty						
Cultural Sensitivity						

Please describe the extent of your contact with the applicant and your knowledge of their abilities.

Please comment on this applicant's ability to work as part of a team.

Often, the position for which this applicant has applied will become demanding. Please describe a time you observed the applicant handling demands on a job or in another setting.

Would you feel comfortable leaving a child in this person's care? Please describe your reasons.

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

Print Name

Date

Signature

Daytime Phone

Title

Thank you for your assistance. Please return as soon as possible to:
YMCA of McHenry County – Camping Services
701 Manor St.
Crystal Lake, IL 60014
Attn: Graham Little
Fax #: 815.459.5101