



CAMP EXCHANGE USA

PARTICIPANT APPLICATION - REFERENCE FORM

Applicant Name: _____

Date: _____

This form must be completed by a non-relative who has known the applicant for at least 6 months.

The individual named above has applied for CIEE's Camp Exchange USA program, a program that brings qualified applicants to the U.S. to work with children as summer camp counselors. This is an intensive program where the applicant will live and work with campers aged 6-17, being their role model and leader day and night over the course of nine weeks. Your honest assessment is necessary in determining the suitability of the applicant for this important role living and working with children.

How do you know the applicant? _____

How long have you known the applicant? _____

Please rate the applicant on the following qualities:

	Excellent	Very Good	Good	Fair	Poor	Unsure
Responsibility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aptitude with children:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment on the applicant's experience with children. How would the applicant perform leading children 24 hours a day for an extended period of time?

Please comment on the applicant's ability to work in a group setting:

Please share your impression of the applicant's character:

CIEE will contact you to check this reference. You may also be contacted by the Camp Director. Please share your most current contact information:

Name: _____ Occupation: _____

Address: _____

Email address: _____ Telephone: _____