



# PARTICIPANT REFERENCE FORM

2020-2021 SEASON

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

### Applicant Name:

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 over the course of nine weeks. Your honest assessment is necessary in determining the suitability of the applicant for this important role of 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 contact information:

Name (please print): \_\_\_\_\_

Email: \_\_\_\_\_

Name of Educational Institution (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date (DD/MM/YYYY): \_\_\_\_\_