

# WESTBURY BAPTIST CHURCH

## RECREATION MINISTRY

10425 Hillcroft, Houston, Texas 77096

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# CAMP WESTBURY

•Confidential Reference Form•

NAME OF APPLICANT \_\_\_\_\_

YEAR \_\_\_\_\_

APPLYING FOR POSITION OF \_\_\_\_\_

Please answer the following questions about the applicant to the best of your knowledge. Thank you for your help.

- How long have you known this person? \_\_\_\_ Years. In what capacity? \_\_\_\_\_
- Do you know this person on a  one-on-one,  small group (1-29),  medium group (30-99),  large group (100+), basis.
- Please circle the appropriate number :

	POOR	AVERAGE			GOOD			SUPERIOR	
TEACHABLE .....	1 2	3	4	5	6	7	8	9	10
PROMPTNESS.....	1 2	3	4	5	6	7	8	9	10
FOLLOWS INSTRUCTION.....	1 2	3	4	5	6	7	8	9	10
OUTGOING .....	1 2	3	4	5	6	7	8	9	10
EMOTIONAL BALANCE .....	1 2	3	4	5	6	7	8	9	10
CAPACITY TO WORK WITH CHILDREN .....	1 2	3	4	5	6	7	8	9	10
CAPACITY TO WORK WITH YOUTH .....	1 2	3	4	5	6	7	8	9	10
FULFILLS OBLIGATIONS .....	1 2	3	4	5	6	7	8	9	10
SENSE OF HUMOR .....	1 2	3	4	5	6	7	8	9	10
TEMPER CONTROL .....	1 2	3	4	5	6	7	8	9	10
FOLLOW-THROUGH ABILITY .....	1 2	3	4	5	6	7	8	9	10
ENERGETIC.....	1 2	3	4	5	6	7	8	9	10
TRUSTWORTHY.....	1 2	3	4	5	6	7	8	9	10
GETS ALONG WITH OTHERS .....	1 2	3	4	5	6	7	8	9	10
TACT .....	1 2	3	4	5	6	7	8	9	10
LEADERSHIP ABILITY.....	1 2	3	4	5	6	7	8	9	10
FRIENDLY .....	1 2	3	4	5	6	7	8	9	10

Please comment on the applicant's spiritual life. \_\_\_\_\_

- Would you completely trust this individual to guide and care for your child in a one-on-one and group  YES  NO setting?
- To your best knowledge, has this applicant ever been expelled or suspended from school or employ-  YES  NO ment, or charged with, arrested for, or convicted of any offense or violation of any statute or law?
- I would  strongly recommend,  recommend,  recommend with some reservations,  not recommend, hiring the applicant.
- What specific reason would you give for hiring or not hiring the applicant? \_\_\_\_\_

8. I expect the applicant's work to be: **POOR**                      **AVERAGE**                      **GOOD**                      **SUPERIOR**

SIGNATURE OF REFERENCE PERSON \_\_\_\_\_ POSITION \_\_\_\_\_ PHONE \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL: \_\_\_\_\_

WRITE ADDITIONAL COMMENTS ON BACK OF FORM