



Easter Seals Camp ASCCA

Matt Rickman, Camp Director

matt@campascca.org

APPLICANT INFORMATION (To be filled out by applicant)

Applicant Name: _____

I give my consent to release information pertaining to me and/or my employment. Further, I release all of my references from any and all responsibility in supplying the requested information.

Applicant Signature: _____ Date: _____

REFERENCE INFORMATION (This portion to be completed by reference)

The applicant above has given your name as a reference while applying for a position at Easter Seals Camp ASCCA. Since this person will be supervising and directing the activities of children and adults with disabilities, it is important that they understand and enjoy being with children and adults. It is important that staff can enjoy and easily live in an outdoor setting, be able to live and work closely with other adults and campers, and work in a both physically and emotionally demanding atmosphere.

Selecting the right staff members to assume this great responsibility of guiding children and adults with disabilities is not an easy task. Please consider your reference a most valuable part of our staff selection process. Your statement regarding this application will be disclosed only to the people making the hiring decisions. Further action depends on your response; your prompt attention will be greatly appreciated. Thank you for your time.

Please rate the applicant using the scale below by circling the appropriate number.

5=Excellent, 4=Good, 3=Average, 2=Fair, 1=Poor

1. Mental & emotional stability	5	4	3	2	1	Not observed
2. Physical stamina	5	4	3	2	1	Not observed
3. Ability to work with co-workers	5	4	3	2	1	Not observed
4. Accepts responsibility	5	4	3	2	1	Not observed
5. Dependability	5	4	3	2	1	Not observed
6. Flexibility	5	4	3	2	1	Not observed
7. Ability to work through stressful situations	5	4	3	2	1	Not observed
8. Leadership ability	5	4	3	2	1	Not observed
9. Exercises maturity in judgment and behavior	5	4	3	2	1	Not observed
10. Accepts criticism	5	4	3	2	1	Not observed

How long have you known the applicant and in what capacity?

Do you know of any reason that would make this applicant unsuitable for working with children and adults with disabilities?

Any additional information you can give us (e.g. special skills, motivation to work in the position applied for, etc.) will be greatly appreciated. Please use the space below or use additional paper.

May we contact you to follow up/verify this reference?: ___ Yes ___ No

Reference signature:		Phone number:	
Print name:		Email:	
Title/Organization:		Date signed:	
Reference should return to Camp (via mail, fax, or email):	Easter Seals Camp ASCCA Attn: Matt Rickman, Camp Director PO Box 21 Jacksons Gap, AL 36861 matt@campascca.org	Contact Information:	256-825-9226 Voice 256-825-8332 Fax matt@campascca.org www.campascca.org

