

National Association of the Deaf 2010 Youth Leadership Camp Staff Reference Form

Your Name: _____

Position/Title _____

E-mail (we may contact you for more information): _____

Name of Applicant: _____

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

Please answer the following questions to the best of your knowledge:

(Please print clearly.)

- How would you rate the applicant in the below categories (please check the most applicable box):

	Poor	Fair	Good	Outstanding
PERSONAL ATTRIBUTES- integrity-honesty-sincerity-respected by peers and others- easy to work with, trustworthy				
PROFESSIONAL DEMEANOR- cooperation with and respect for authority- ability to work in team environment- interpersonal skills- follows rules and instructions with ease				
LEADERSHIP- skillful motivator-enthusiastic accepts responsibility- ability to give instructions and delegates effectively inspiration to others				
JUDGEMENT- considers all aspects of the situation and is capable of making sound decisions based on facts- demonstrates responsibility well- a problem-solver				
ORGANIZATIONAL SKILLS- able to work effectively within structured environment and multitask in a limited amount of time and complete on time				
COMMUNITY INVOLVEMENT- ability to serve as a positive role model- self-confidence-assertiveness-willingness to give back to the community				

2. Has the applicant demonstrated any behavior which would hinder or predict successful performance in a NAD Youth Leadership Camp position?

3. From your knowledge, how well does the applicant relate to: a) high school students, b) employers, c) co-workers?

4. *(For camp counselor applicants only)* In your opinion, what are the applicant's best camp activity skills and outstanding personality strengths relevant to camp counseling? How well do you think the applicant could teach their activity skills at camp?

5. Due to our camp's tradition of valuing administrative team members and staff's personal growth in leadership and team co-effort at camp, we would like to know from your perspective, what are the applicant's general strengths and weaknesses? Please explain.

Thank you for taking the time to evaluate our applicant. Your insights are highly valuable and will be kept confidential. **Please return this form by March 26, 2010.** The applicant cannot be processed without three references.

Your Signature _____ Date: _____

Please email or fax this completed form to:

NAD YLC
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