



Virginia Cooperative Extension

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4-H Teen Camp Counselor/CIT Reference Form 2017

Teens: Please only provide references with this hard-copy reference form if the reference cannot or prefers not to complete the reference online. If they would like to do this online, please send the 4-H office their e-mail address and we will send them a link to a URL.

References: Please complete this form and return by mail, email (scanned) or fax to the addresses listed below by **February 28, 2017**. *This form is confidential; responses will not be shared with the teen or parents.*

Thank you for agreeing to serve as a reference for a teenager who is applying for a Teen Camp Counselor/ Councilor in Training position for the Northampton County Junior 4-H Camp. Camp Counselors supervise campers (ages 9-14) throughout the day and at night and help with camp classes and activities. **The role of Camp Counselor requires a great deal of maturity and responsibility as the counselors are one of our main forms of camper supervision and are responsible for keeping campers safe. Your honest evaluation of this teen's ability to perform these functions is very helpful.** If you have questions or concerns about this role, please contact Christina Murray, the Extension 4-H Agent, at 757-678-7946 or cmmurray@vt.edu.

Name of 4-H Camp Counselor Applicant: _____

Your Name (Please print): _____ Phone Number: _____

In what capacity and for how long have you known the applicant?

Please rate the applicant on the following attributes:

	Excellent	Good	Fair	Poor	Not Sure
Trustworthiness					
Works well with peers					
Works well with adults					
Works well with children					
Respectfulness					
Responsibility					
Maturity					
Leadership					
Obeys rules					
Caring (shows concern for others)					
Positive Attitude					
Cooperation/works well in a team					
Enthusiasm					
Communication Skills					
Dependability					
Initiative to do things without being told					
Good Role Model					
Exhibits Self-Control					
Initiative to report issues or concerns					

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Do you know of any reason why this person should not work with children? (If yes, please explain.)

Would you recommend the applicant to serve as a Camp Counselor working with children in a supervisory role?

_____ **yes, wholeheartedly** _____ **yes, with some reservation** _____ **no**

Other comments or information you think we should know when making our selections:

Signature: _____ **Date:** _____

Please return this form:

By Mail/or Hand:
VCE-Northampton
7247 Young St
Machipongo, VA 23405

By email:
cmurray@vt.edu

Fax:
757-678-7944

Forms are due by February 28, 2017.

Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. If you are a person with a disability and desire assistance or accommodation, please notify the Northampton VCE Office at (757-678-7946/TDD*) during business hours of 8:30 a.m. and 4:30p.m. *TDD number is (800) 828-1120.