



PERSONAL REFERENCE FORM

Date: _____

(This section to be completed by Applicant)

APPLICANT'S NAME: _____
ADDRESS: _____
TELEPHONE: _____
POSITION(S) APPLIED FOR: _____

(This section to be completed by your contact)

We appreciate your comments and assistance in choosing workers for summer service. Please answer the questions as honestly and specifically as you are able. If you have further comments, you may call. Thank you.

1. How well do you know the applicant and in what capacity? _____

2. Is the applicant living a Christian life/lifestyle? _____
3. Do you feel that he/she would be able to minister to others? _____

4. To your knowledge, is the applicant discreet in all his/her relationships with the opposite sex according to biblical Christian standards? _____
5. Are there any negative tendencies of which we should be aware? _____

6. Would you want your child placed under the care and influence of this individual? _____

7. Additional Comments: _____

Character Appraisal – Please **check** all statements which you know to be true about the applicant:

Physical Health

- | | | |
|----------------------------------|---|--|
| <input type="checkbox"/> rugged | <input type="checkbox"/> on medication | <input type="checkbox"/> tires quickly |
| <input type="checkbox"/> average | <input type="checkbox"/> frequent colds | <input type="checkbox"/> health problems |

Social Life

- | | | |
|--|---|--|
| <input type="checkbox"/> friendly | <input type="checkbox"/> shy | <input type="checkbox"/> has difficulty making friends |
| <input type="checkbox"/> contributes to others | <input type="checkbox"/> leans on others | <input type="checkbox"/> a loner |
| <input type="checkbox"/> gets along well with others | <input type="checkbox"/> drifts in and out of friendships | |
| <input type="checkbox"/> outgoing | <input type="checkbox"/> needs considerable privacy | |

Home Life

- | | |
|---|---|
| <input type="checkbox"/> loves his/her family | <input type="checkbox"/> respects parents |
| <input type="checkbox"/> contributes to family's well-being | <input type="checkbox"/> conflict at home |
| | <input type="checkbox"/> has no family |

Leadership Ability

with peer group:

- follower
- pace setter
- accepts responsibility when asked

with children:

- exceptional,
- comes naturally,
- enjoys leading children
- do not recommend him/her in this capacity

Church Life

- attends regularly
- actively involved
- a bench warmer
- attends irregularly

Personality

- Steady, consistent, not given to mood swings
- analytical, reflective, contemplative
- confident, self-assured
- loyal, devoted, friendly
- life of the party, known by all
- tentative, self-conscious
- withdrawn, a loner
- expressive, animated
- blunt, upfront
- entertaining
- brash, arrogant
- timid, shy

Work Habits

- enjoys work
- takes pride in his work
- completes assignments
- on time
- follows instructions carefully
- rarely gives up
- dependable
- perfectionist
- lazy, lets others do it when possible
- ignores instructions
- often late
- a quitter
- sloppy
- does just enough to get by
- irresponsible

Emotional Stability

- stable
- irritable
- anxious
- peaceful
- easily discouraged
- occasional depression
- difficulty controlling temper
- nervous
- moody

Christian Character -the following traits are evident in his/her relationship with people:

- love
- joy
- peace
- patience
- kindness
- goodness
- faithfulness
- gentleness
- self-control

Spiritual Life

- steady and growing
- applies Biblical principles
- an inspiration to others
- victorious
- leans on friends
- lacks victory
- up and down

Christian Testimony

- effective
- depends on people he/she is with
- enjoys sharing testimony
- weak, has no testimony
- finds it difficult to share testimony

YOUR NAME: _____ PHONE: _____

ADDRESS: _____ POSTAL / ZIP CODE: _____

Please **do not return** this form to the applicant. Mail or Email this reference form directly to:

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