

Indiana District Assemblies of God TEEN & KIDS CAMP REFERENCE FORM

_____ has applied for a position at an Indiana Assemblies of God Summer Camp. He/She has submitted your name as a reference. Please complete and return this form as soon as possible. Responses will be confidentially reviewed.

1. How do you know the applicant? _____

How long have you known the applicant? _____

How well do you know the applicant? _____

2. Have you seen the applicant with children ages:

Ages 8-12 Yes No

Ages 12-15 Yes No

Ages 16-19 Yes No

How well does the applicant relate to such children? _____

3. Would you feel comfortable leaving your children in their care? _____

4. Is the applicant able to administer discipline without going overboard? _____

5. Are there any tendencies or traits which you feel might reduce the effectiveness of the applicant in this position? _____

6. Has the applicant ever been discharged for any abuse related or sex related activity? _____

7. Please give a brief statement of your opinion of the applicant's character and attitude _____

8. Does the applicant have any emotional or behavioral problems? _____

9. Do you believe there is anyone we should contact who could provide additional information regarding this applicant? If so, please provide their name and address _____

Your Name (PLEASE PRINT) _____ Date _____

Signature _____ Phone () _____

Address _____

Additional Comment: (Use reverse side if necessary) _____

****Please return within 2 weeks of receiving this form.***

Scan & Email: [jreese @ indianaag.org](mailto:jreese@indianaag.org)

Fax: 317-879-3619

Mail: Camp, 8750 Purdue Road, Indianapolis, IN 46268

Indiana District Assemblies of God DISH CREW REFERENCE FORM

_____ has applied for a dish crew position at an Indiana Assemblies of God Summer Camp. He/She has submitted your name as a reference. Please complete and return this form as soon as possible. Responses will be confidentially reviewed.

As a member of the Dish Crew staff students will be working in the kitchen for all meals by washing dishes and cleaning the cafeteria. Students will also be working in the Concession Barn where they will help prepare concession food as well as operate a window by taking orders, adding items, and making change. Your reference will allow us to know if the student is capable of completing the tasks required.

1. How do you know the applicant? _____
2. How long have you known the applicant? _____
3. How well do you know the applicant? _____
4. Is the applicant responsible and able to carry out instructions without constant supervision? _____
5. Does the applicant have any physical limitations? _____
6. Do you know of any situations where the applicant has not been honest or trustworthy? _____

7. Would the applicant be capable of counting money and making change? _____
8. Are there any tendencies or traits which you feel might reduce the effectiveness of the applicant in this position? _____

9. Please give a brief statement of your opinion of the applicant's character and attitude _____

10. Does the applicant have any emotional or behavioral problems? _____

11. Do you believe there is anyone we should contact who could provide additional information regarding this applicant? If so, please provide their name and address _____

Your Name (PLEASE PRINT) _____ Date _____

Signature _____ Phone () _____

Address _____

Additional Comment: (Use reverse side if necessary) _____

***Please return within 2 weeks of receiving this form.**

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