



# Camp CILCA Outdoor Ministries

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## Junior Counselor Reference Form

Name of Applicant: \_\_\_\_\_

The above named person is applying to be a Junior Counselor at Camp CILCA. CILCA's Junior Counselor Program is designed to give high school students the opportunity to serve their Lord in a Christian setting, and at the same time, receive valuable training in leadership skills. In order to assist us in selecting suitable Junior Counselor applicants, please complete this form and return it directly to CILCA. Use the back as needed. If you have any questions, please contact the camp office. Thank you!

- 1.) In what capacity do you know the applicant?
- 2.) How long have you known the applicant?
- 3.) On a scale of 1 to 10 (with 1 being low and 10 being high), please rate the applicant on each of the following characteristics. If you have insufficient knowledge to comment on a particular characteristic, please leave it blank.

<b>Please Rank the Following</b>	<b>Rating</b>	<b>Comments</b>
<i>Ability to work with others</i>		
<i>Ability to relate to children</i>		
<i>Leadership</i>		
<i>Personal motivation and initiative</i>		
<i>Dependability</i>		
<i>Trustworthiness</i>		
<i>Attitude</i>		
<i>Pride on one's work</i>		
<i>Organizational skills</i>		
<i>Christian character</i>		

- 4.) Are you aware of any facts demonstrating that the applicant's involvement in outdoor ministry should be restricted? If yes, please explain.
- 5.) Are you aware of any facts demonstrating that the applicant should not be considered by Camp CILCA for a Junior Counselor position? If yes, please explain.
- 6.) Based on your knowledge of the applicant, which best reflects your evaluation of the applicant's suitability to be a Junior Counselor?  
 Highly recommend       Recommend       Neutral       Do not recommend  
 Insufficient knowledge to form opinion
- 7.) Do you have any additional comments concerning the suitability of this applicant as a Junior Counselor at Camp CILCA?

Reference Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_