



# Staff Reference Form

## Shiloh Summer Camp

601 NE 63rd St.  
OKC, OK 73105  
405.858.7011 – phone  
405.858.7012 – fax  
[info@shilohcamp.org](mailto:info@shilohcamp.org)

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

Position Desired: \_\_\_\_\_

**The applicant mentioned above would like to use you as a reference. Please complete this form and mail to Shiloh Summer Camp at the above address. Thank you for your time.**

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

How long have you know the applicant: \_\_\_\_\_ In what capacity? \_\_\_\_\_

If applicant has worked for you, what was the position? \_\_\_\_\_ For how long? \_\_\_\_\_

*Please comment on the following characteristics as STRONG, GOOD, NEEDS TO IMPROVE, or “?” due to lack of observation or interaction.*

<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Sense of humor
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Cooperation with others
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Tact
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Emotional control
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Sensitivity to feelings / needs of others
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Integrity
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Christian character and moral standards
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Independent worker / Self-discipline
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Ability to work and play with children
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Ability to accept suggestions / criticism
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Energy and persistence
<input type="checkbox"/> STRONG	<input type="checkbox"/> GOOD	<input type="checkbox"/> NEEDS TO IMPROVE	<input type="checkbox"/> ?	Overall personality / disposition

\*Would you place your child under this person's guidance?  Yes  No

\*Additional thoughts on their strengths or weaknesses:

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Signature

Phone or E-mail

Date

**Thank you for your time!**