

Reference Form • Howard H. Cherry Scout Reservation • Hawkeye Area Council, Boy Scouts of America

*NOTE TO APPLICANT — Please fill in your name and give this form to the three references you have listed on your application.
 Please provide a self-addressed stamped envelope returning this form to: Camp Director, Hawkeye Area Council, 660 32nd Ave SW, Cedar Rapids, IA 52404
 References are only required if you have **not** been employed at HHCSR within the last 4 years.

_____ is applying for a seasonal position on the camp staff with the Hawkeye Area Council. Staff is responsible for providing quality program to over 1,000 Boy Scouts, Webelos, Cub Scouts and adult leaders.

We would greatly appreciate your evaluation of this applicant. Please complete this form at your earliest convenience and return to: Hawkeye Area Council, BSA 660 32nd Ave SW, Cedar Rapids, IA 52404. All information will be kept confidential.

How long have you known this applicant? Years _____ Months _____ In what capacity do you know the applicant?

Your comments are of the utmost importance as we select staff for the upcoming camping season. Please circle the phrase that best describes this applicant.

Appearance (grooming, dress)	Flawless	Well-Groomed	Generally Neat	Slovenly
Dependability	Exceptional	Dependable	Requires Supervision	Irresponsible
Initiative	Resourceful/Self Motivated	Industrious	Has Necessary Drive	Indifferent
Personality	Magnetic	Outgoing	Pleasing	Bland
Cooperation with Peers	Inspires Confidence	Cooperates Willingly	Usually Cooperative	Obstructionist
Leadership	Inspirational	Able to Take Charge	Good Team Member	Incapable of Leading
Attitude	Always Enthusiastic	Positive	Generally Acceptable	Negative
Common Sense	Always Uses Sound Judgement	Usually Sound	Needs Experience	Lacking
Oral Communications	Eloquent	Excellent Grammar	Satisfactory	Limited
Integrity	Always Trustworthy	Generally Reliable	Sometimes Lacking	Can't Be Trusted

What, in your estimation, is this person's greatest ability? _____

What, in your estimation, might be this person's weakness? _____

Do you know of any reason this applicant should not serve in a camp leadership role? _____

Recommendation:

_____ Highly recommend _____ Recommend employment _____ Do not recommend employment

Your Name (please print): _____ **Signature:** _____

Phone: _____ **Date:** _____