



**2022 Leader in Training Program
Reference Form**



638 N. 18th St., Milwaukee, WI 53233
888.797.4543 414.937.6784
kfrederick@glhf.org glhf.org

DUE: MARCH 25, 2022

Applicant's Name: _____ Date: _____

The person above is applying to work with children in a residential camp setting. Your assessment of their ability to work with children is essential. All evaluations will be kept confidential and will not be shared with the applicant. Only upon receiving this reference may the applicant be considered for this program.

Your Name: _____

What is your relationship with the applicant? _____

How long have you known this applicant? _____

Preferred contact information: (phone and email) _____

Please rate the applicant using the the scale below by marking the appropriate column.

| | POOR 1 | NEEDS WORK 2 | SOLID 3 | GOOD 4 | EXCEPTIONAL 5 | N/A | Comments |
|---------------------------------------------------------------------------------------|-----------|--------------------|------------|-----------|------------------|-----|----------|
| Leadership Engaging, Positive, Encouraging | | | | | | | |
| Teamwork Cooperative, Collaborative, Fair, Respectful, Flexible | | | | | | | |
| Responsibility Time management, Completes tasks, Honest | | | | | | | |
| Maturity Self-Control, Self-aware, Accountable | | | | | | | |
| Communication Active listener, compassionate | | | | | | | |
| Work Ethic Passionate, Self-motivated, Accepts constructive criticism | | | | | | | |
| Decision Making Rational, Inclusive, Purposeful | | | | | | | |

Additional Notes:

Why would this applicant excel working with children in a residential camp setting?

Camp can be very demanding, requiring long hours, physical work and emotional maturity. Do you think the applicant would be suitable for the position? If yes, how have you seen them demonstrate these qualities or skills? If no, how could we help them to succeed?

In your opinion, what traits does this individual possess that would make a good leader?

What are the applicant's areas needing growth? If chosen, in what ways can we provide this applicant support to help them be successful in this position?

Please return this reference form to Kailee Frederick at Great Lakes Hemophilia Foundation. Please call or email if you have any questions or concerns. Thank you!

Email: Kfrederick@glhf.org

Fax: 414.257.1225

Phone: 414.937.6784

Address:

Great Lakes Hemophilia Foundation

638 N. 18th St. Suite 108

Milwaukee, WI 53233