



# Michigan Region Missionary Church

1091 Creekwood Trail  
Burton, MI 48509  
Phone: 810-742-7462  
Fax: 810-742-8102  
Email: office@mcmichigan.org

## CAMP STAFF REFERENCE FORM

**Applicant: Please provide the information on the first portion of this form.**  
**Applicant Information**

Please check all camps that apply: **Brown City Youth**  **Brown City Kidz**  **Mancelona Youth**

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

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

## Referent Information

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

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

Phone No: \_\_\_\_\_ Email Address: \_\_\_\_\_

Title/Position: \_\_\_\_\_ Organization: \_\_\_\_\_

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

Would you trust this person at camp with your child? \_\_\_\_\_

What do you consider to be the applicant's strengths or weaknesses as a counselor?  
\_\_\_\_\_  
\_\_\_\_\_

Do you know of any area in which the applicant might need special attention? \_\_\_\_\_

Please rank the applicant on a scale of 0 to 4 in the following areas:  
(0 = cannot report, 1 = below average, 2 = average, 3 = above average, 4 superior)

Intellect	Initiative	Reliability	Leadership	Compassion	Moral Integrity	Emotional Stability	Social Skills	Christian Commitment

I recommend the applicant (please check one of the following):  
Without reservation  Strongly  With reservation  No recommendation

I prefer to discuss this further. Please call me at this number during the day: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Return completed reference form to: Michigan Region Missionary Church ~ 1091 Creekwood Trail ~ Burton, MI 48509