

Rock Springs 4-H Center Reference Form

Name of applicant: _____

Name of reference: _____

Please fill out the following information as completely and honestly as possible.

The experiences of over 10,000 Kansas youth depend on the quality of our summer staff.

What is your relationship to the applicant and how long have you known each other?

Please rate the applicant in each of the following categories by putting an X in the appropriate blank.

	Excellent	Good	Average	Below Avg.	N/A
hard working	_____	_____	_____	_____	_____
honest	_____	_____	_____	_____	_____
mature	_____	_____	_____	_____	_____
reliable	_____	_____	_____	_____	_____
physically capable of doing camp work		Yes_____	No_____		

Comments: _____

Do you have knowledge of the applicant's abilities in _____?
(area applying for)

If so, please list your observations. _____

If you were in a position to hire this person, would you? _____

Please list any further comments you have concerning the applicant, which might be helpful in our decision. _____

Signed: _____ Date: _____

Please return this form to: Rock Springs 4-H Center, c/o Summer Jobs
1168 Highway K157
Junction City, KS 66441