



Summer Staff & Leadership Training Reference Form

Please return completed form to:

Emily Tull, Program Director

Email: program@ewalu.org

Mail: 37776 Alpha Ave.

Strawberry Point, IA 52076

Phone: 563-933-4700

The person listed below is requesting that you evaluate his/her/their suitability to be a participant in our summer youth ministry staff. This form will be used with confidentiality and only by people involved in the selection process. You can learn more about Camp Ewalu, a Lutheran outdoor ministry, at ewalu.org.

Name of Applicant: _____

Your name (submitting reference): _____

Your address: _____

Your City, State, ZIP: _____

Your phone: _____

Your email address: _____

How long have you known the applicant? _____

What is your relationship to the applicant? _____

Please rank the applicant in the following areas using the scale below:

0	1	2	3	4	5
Unable to Evaluate	Very Low	Low	Okay / Average	High	Extraordinary

___ Maturity

___ Experience in Christian youth ministry

___ Responsibility

___ Work experience with children/youth

___ Personable

___ Relates well to children/youth

___ Openness to criticism

___ Leadership ability

___ Relates well with peers

___ Leadership Experience

___ Personal faith

___ Able to adapt to new situations

___ Involvement in congregation

___ Able to work as part of a team

Please share your insights regarding the applicant in the following areas. If you are unable to respond in a given area, please note.

1. What do you see as the applicant's greatest gifts?
2. Please share what you can about the applicant's experience and ability to work with children, youth and adults.
3. Would you be willing to have your own children under the applicant's supervision for a week in a camp situation? If not, why?
4. Is the applicant able to share their faith with others through devotions, worship and Bible study?
5. What concerns do you have about the applicant's ability to serve as a member of the summer staff?
6. To your knowledge, does the applicant have any tendencies toward child or sexual abuse?
7. Your overall evaluation of the applicant and his/her/their suitability for this position:

Other comments:

Signature: _____ Date: _____

Thank you for your time!