GENESEE VALLEY ROTARY CAMP APPLICANT REFERENCE FORM

Return to: G.V.R.C. Director ♦ Brian Bartalo ♦ 233 Hollybrook Road ♦ Brockport, NY 14420 ♦

Applicant's Name:			Date:	
for children and young ad name as a reference. In o	ults (ages 8-21) wrder for us to mak need you to comp	vith disabilities. e a better determ lete this form as	The applicant nation of his/heraccurately as pos	week residential summer camp med above has submitted your rability to perform as a staff sible based on your personal tion.
How long have you kno	own the applican	nt?		
In what capacity have y	ou known him/ł	ner?		
How would you rate the	e applicant on th	ese qualities?	(Feel free to use	e the back to add comments
Responsibility	excellent	good	fair	poor
Initiative	excellent	good	fair	poor
Creativity	excellent	good	fair	poor
Leadership	excellent	good	fair	poor
Maturity	excellent	good	fair	poor
Work Ethic	excellent	good	fair	poor
Energy/Enthusiasm	excellent	good	fair	poor
Common Sense	excellent	good	fair	poor
In your opinion, is the a	applicant respons	sible enough to	entrust him/he	r with (disabled) children?
Our camp is sponsored self". Would this personeeded)				o motto is "Service above Ther own? (use back if
Your Name:Address:				
)
				,.