

Blue Ridge Camp

510 NW 84 Ave. Plantation, Fl 33324

954-665-8686...706-746-5491

EMAIL: campblueridge@gmail.com

REFERENCE FOR: _____

POSITION APPLIED FOR: _____

THE ABOVE NAMED PERSON IS APPLYING TO BLUE RIDGE CAMP FOR A RESIDENTIAL SUMMER CAMP COUNSELOR AND/OR PROGRAM SPECIALIST POSITION. THIS FORM MUST BE COMPLETED BY A PAST OR PRESENT EMPLOYER. PLEASE COMPLETE THIS FORM AND RETURN IT TO THE ABOVE FAX NUMBER OR MAILING ADDRESS.

IN WHAT CAPACITY DO YOU KNOW THE APPLICANT? _____

DOES THE APPLICANT POSSESS THE SKILLS/KNOWLEDGE TO PERFORM THE JOB THEY ARE APPLYING FOR? PLEASE EXPLAIN

WOULD YOU EMPLOY THE APPLICANT IN AN AREA OF RESPONSIBILITY WITH CHILDREN? WHY OR WHY NOT _____

PLEASE CIRCLE THOSE QUALITIES WHICH MOST DESCRIBE THE APPLICANT:

TAKES INITIATIVE ENTHUSIASTIC RELIABLE CREATIVE PUNCTUAL
COMMUNICATIVE STAMINA RESPONSIBLE EMOTIONAL MATURE
LEADER.....ADDITIONAL QUALITIES _____

ADDITIONAL COMMENTS: _____

SIGNATURE _____ DATE _____

PRINT NAME _____ TITLE _____

COMPANY NAME _____

OCCUPATION _____

CONTACT NUMBER OR EMAIL ADDRESS _____

*****PLEASE FAX TO: 786-955-2740 OR EMAIL: campblueridge@gmail.com**