

1041 East Lakeview Road, Chestermere, AB T1X 1B1 Ph# (403) 272-6030 Fax# (403) 272-7869 Email: CLTD@campchestermere.com

CLTD Reference Form 2020

| the form to the camp office using the information at the botte and not the CLTD applicant. Only CLTD APPLICANTS To form. New CLTD applicants may use one Camp Chestermer members as their reference. Please note that SECOND YEAR returned to Camp Chestermere unless it's their first year attention. | |
|---|---|
| All references should be over the age of 18 and have known the | he applicant for at least a year. |
| Applicant's Name (Please print): | Program applying for: 1st Year 2nd Year 3rd Year |
| "I hereby agree that references given as part of this application | n procedure are confidential and I waive the right to access this information." |
| | |
| Applicant's Signature | |
| seeking to gain a deeper understanding of their faith, the camas a reference for them. The information you provide will help | ogram at Camp Chestermere is designed to inspire, teach, and train young people op community, and service. The applicant listed above has requested that you act ous know more about the applicant and how to best lead them. Please fill out this |
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| Strengths and Weaknesses | | | | |
|---|--|--|--|--|
| What strengths would the applicant bring to this program (e.g.; skills, talents, personality, leadership, etc.)? | | | | |
| | | | | |
| To your knowledge does the applicant use: Tobacco? Alcohol? Drugs? | | | | |
| What characteristics of the applicant do you feel could use further work or development? | | | | |
| | | | | |
| Describe any concerns you may have about their lifestyle, attitude, or morals. | | | | |
| | | | | |
| Would you say that the applicant's friendships have a positive or less than positive influence on the applicant? Please explain: | | | | |
| | | | | |
| Is the applicant receptive to instruction? Yes No | | | | |
| Comments: | | | | |
| Recommendation | | | | |
| Would you recommend this applicant for our Christian Leadership Training and Discipleship program? | | | | |
| ☐ Highly recommend ☐ Recommend, but with these reservations/comments ☐ Not able to recommend at this time | | | | |
| Comments and/or reservations: | | | | |

Personal Evaluation

For each of the following characteristics, please check all the boxes that best describes the applicant:

Attributes Patience: Usually patient Ability to pace oneself:

| | _ | o cuamy paracing | , 1.5ty to poset | | •• | |
|----------------|-------|----------------------------------|------------------|---------|---------------------------|--|
| | | Consistently patient | | | Soon Exhausted | |
| | | "Patience of a Saint" | | | Aware of limits | |
| | | No observation | | | Well able to adjust | |
| Self-Control: | | | Use of time: | | • | |
| | | Undisciplined | | | Tends to procrastinate | |
| | | Usually disciplined | | | Diligent | |
| | | Very self-disciplined | | | Purpose Driven | |
| | | No observation | | | ' | |
| Additional Co | mme | ents: | | | | |
| Personality. | Cha | racter and Health | | | | |
| Responsibility | | | Emotional sta | bilitv: | | |
| | , | Starts but does not finish tasks | | | Over-responds | |
| | | Does only what is assigned | | | Usually well-adjusted | |
| | | Meets average expectations | | | Very well-balanced | |
| | | Shows initiative | | | , | |
| | | Works well without supervision | | | | |
| | | · | Support of Po | licies | : | |
| ntegrity: | | | | | Might ignore some rules | |
| • • | | Occasionally suspect | | | Respectful | |
| | | Consistent morals | | | Applies assigned policies | |
| | | High morals and values | | | | |
| A 1.111 1 O . | | | | | | |
| Additional Co | mme | ents: | | | | |
| | | | | | | |
| Leadership a | and F | Relationships | | | | |
| | | - | | | | |
| _eadership: | | Follower | | | | |

Initiative:

| Follower Seldom takes the lead Has leadership potential | Constructive Criticism: |
|---|--|
| Recognized leader | □ Open to correction□ Highly responsive |
| Needs prodding | Response to authority: |

□ Rebellious/critical of authority Leads when asked □ Compliant/generally respectful Initiates frequently Willing and ready/reliably supportive

| Team Player: | | | | Can be uncooperative |
|--------------------|---|------------------------------|---------------------|--|
| | Prefers to work alone | | | Generally cooperative |
| | Asset to the team | | | Works well with others |
| | Great team player | | | |
| | . , | | Conflict Resolution | 1: |
| Compassion & er | npathy: | | | May leave issues unresolved |
| | May lack sensitivity | | | Seeks reconciliation |
| | Sensitive to others/non judgr | nental | | Takes initiative to be reconciled |
| | Active love and concern | | | |
| Additional Comm | ents: | | | |
| | | | | |
| | | | | |
| | | | | |
| Would you be will | ling to do a potential later follow | up phone call from a CLT | leader about this a | pplicant? YES NO |
| | | | | |
| | | | | |
| Signature: | | Date |) : | |
| | | | | |
| • | ing the time to answer the abov suitability for the program. | e questions and for giving r | us any feedback tha | t will be helpful in leading the applicant and |
| D | | | | |
| Please return this | form to Camp Chestermere by | using any of the following i | metnods: | |
| Email: | | Fax: | Mail: | |
| CLTD@campche | stermere.com | (403) 272-7869 | 1041 East Lake | view Road, Chestermere, AB T1X 1B1 |

Cooperativeness: