



**2023 Leader in Training Program
Reference Form**



638 N. 18th St., Milwaukee, WI 53233
888.797.4543 414.937.6784
kfrederick@glhf.org glhf.org
DUE: MARCH 26, 2023

Applicant's Name: _____ **Date:** _____

The person above is applying to work with children in a residential camp setting. Your assessment of his/her ability to work with children is essential to us. All evaluations will be kept in strict confidence and will not be shared with the applicant. Only upon receiving this reference can the applicant be considered for this program.

Your Name: _____ **Title** _____

What is your relationship with the applicant? _____

How long have you known this applicant? _____

Preferred contact information: _____

Please rate the applicant's traits on the scale below by marking the appropriate column.

	POOR 1	NEEDS WORK 2	SOLID 3	GOOD 4	EXCEPT IONAL 5	N/A	Comments
Leadership Engaging, Positive, Encouraging							
Teamwork Cooperative, Collaborative, Fair, Respectful, Flexible							
Responsibility Time management, completes tasks, Honest							
Maturity Self-Control, Self-aware, Accountable							
Communication Active listener, compassionate,							
Work Ethic Passionate, self-motivated, accepts constructive criticism							
Decision Making Rational, Inclusive, purposeful							

Additional Notes:

Why would this applicant be good at working with children in a residential camp setting?

Camp can be very demanding, requiring long hours, physical work and emotional maturity. Do you think the applicant would be suitable for the position in this regard? If yes, how have you seen them demonstrate these qualities or skills? If no, how could we help them to succeed?

In your opinion, what traits does this individual possess that would make a good leader?

What are the applicant's area's needing growth? If chosen, in what ways can we provide this applicant support to help him/her be successful in this position?

Please return this reference form to Kailee Frederick at Great Lakes Hemophilia Foundation. Please call or email if you have any questions or concerns. Thank you!

Email: Kfrederick@glhf.org

Fax: 414.257.1225

Phone: 414.937.6784

Address:

Great Lakes Hemophilia Foundation
638 N. 18th St. Suite 108
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