

LIT/CIT Reference Form

May not be family or friend

Applicant's name: _____

Your name: _____

Phone: _____

How do you know the applicant? _____

Return completed form to:

YMCA Camp McConnell

210 SE 134th Avenue

Micanopy, FL 32667

Fax: (352) 466-3587

Email:

nikole.piche@ymcapalmbeaches.org

Please rate the applicant on the following:

1= Not accurate

2= Somewhat accurate

3= Very accurate

4= Not applicable

The applicant is more mature than his/her peers

1 2 3 4

If someone is in need, the applicant is the first to help

1 2 3 4

The applicant take criticism well

1 2 3 4

The applicant has a hard time following others

1 2 3 4

When the going gets tough, the applicant tends to give up

1 2 3 4

The applicant has a positive disposition in life

1 2 3 4

The applicant is a team player

1 2 3 4

The applicant is patient and does not become frustrated often

1 2 3 4

The applicant is tolerant and accepting of others

1 2 3 4

The applicant takes initiative

1 2 3 4

The applicant is likely to behave in a safe manner

1 2 3 4

I would recommend the applicant for your program

1 2 3 4

Please write any additional comments here:

By signing below, I confirm that my identity and relation to the applicant, as listed above, is accurate.

Signature: _____

Date: _____