

Camp St. Charles Mentor Program
Personal Reference Form

Name of Applicant (Mentor): _____

Name of Person Completing Reference: _____

Relationship to Child: _____ (no relatives)

Phone or e-mail : _____

How long have you known the applicant? _____

The applicant named above is applying to participate in the Mentor program at Camp St. Charles. Mentors assist younger campers during their two week camp experience. We are seeking responsible, enthusiastic people who will be loving, caring role models to other campers. Please help us to select the best candidates by answering the following questions.

1. Have you observed this person interacting with peers? Yes or No

2. Does this person use appropriate language? Yes or No

3. Would this person benefit from serving as a leader to a group of younger children? Yes or No

4. I would trust this person to assist in caring for children? Yes or No

5. Please use the space below to describe that attributes that this person has that would make them well suited to our Mentor program.

Signature: _____ Date: _____

Please seal this form in an envelope and sign the seal prior to returning it to the applicant.