

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 participant 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.**