

Please Mail to...

Before April 30th: CAMP TANUGA – 139 W. MAPLE RD. SUITE E - BIRMINGHAM, MICHIGAN 48009

After April 30th: CAMP TANUGA – 6874 CAMP TANUGA RD NE - KALKASKA, MICHIGAN 49646

Applicant's Name _____ has applied for a _____
position at CAMP TANUGA.

Please check in the appropriate column the attributes for which you have adequate information for appraisal.
If not known in some category, please state "unknown."

ATTRIBUTES	Unknown	Superior	Above Average	Average	Below Average	Poor
Self Esteem						
Appearance						
Dependability						
Honesty						
Insightfulness						
Personality						
Maturity						
Emotional Stability						
Love of Children						
Cooperation						
Enthusiasm						
Charisma						
Loyalty						
Leadership						
Motivation or Initiative						
Concern for Others						
Ability to Accept Supervision						
Desire to Learn						
GENERAL EVALUATION						

Do you believe the applicant can work well with children? Yes No

Would you entrust your own children to this applicant? Yes No

In what capacity have you known the applicant?

How long have you known the applicant? _____ From _____ To _____

Would you employ applicant in a position working directly with children? Yes No

If NO, Explain _____

Please Provide Supplementary Comments _____

Name of person supplying reference _____

Should we need additional information please supply a daytime phone where you can be reached _____

Signature _____ Title or Official Position _____

Address _____

Phone Number _____ Date Form Completed _____

Please be assured that this information will be kept confidential.

Thank you for your cooperation.

Sincerely,

Mark Coden / Sid Friedman / Jenny Kellman-Fritz / Ron Fritz

Directors