

# The Max and Marion Caldwell Foundation

Please pass a reference form to 3 people whom you feel knows your child well. Be sure to check which campership applies.

Applicant's Name \_\_\_\_\_

I hereby authorize The Max and Marion Caldwell Foundation to conduct an investigation of my background. I release from all liability or responsibility The Max and Marion Caldwell Foundation, its officers and employees, and all persons who supply information in connection with such investigation.

Applicant's Parent/Guardian Signature \_\_\_\_\_

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*This applicant has named you as a person ready and willing to make an evaluation of his or her character and skills. Please complete the following form and return it to the applicant or directly to The Max and Marion Caldwell Foundation as soon as possible.*

*To the best of your ability, please give us **your opinion** of the applicant in the following areas by circling the appropriate rating. 1 is poor, 5 is excellent.*

Honesty	1	2	3	4	5
Leadership skills	1	2	3	4	5
Willingness to follow rules	1	2	3	4	5
Responsibility	1	2	3	4	5
Relationships with peer group	1	2	3	4	5

\_\_\_ Average control of emotions

\_\_\_ A quick temper, and easily irritated

In which of the following settings have your observations of this person been made?

Indicate all that apply:

\_\_\_ Social/Family settings

\_\_\_ Educational

\_\_\_ Work/employment

\_\_\_ Sporting/coaching

I consider this person to have:

\_\_\_ Good control of emotions

\_\_\_ Dislikes authority and supervision

When relating to adults, this person:

\_\_\_ Is always cooperative and deals well with authority.

\_\_\_ Often questions authority but will follow through on assignments.

When I see this person around other children I notice that he/she is:

\_\_\_ Very confident, easy going

\_\_\_ A little nervous but comfortable

\_\_\_ Very nervous and awkward

Applicant's Name \_\_\_\_\_

***We want camp to be a positive experience for this child, so your honest input is very important to us. (It is necessary that children can work together in groups and follow rules.)***

What are the camper's strengths?

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What are the camper's challenges?

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How do you feel a camp experience would help this applicant?

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Is there anything else you can tell us that will help to make a decision about this applicant?

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***To the referee: Thank you for your evaluation of the applicant. Please complete the following personal information. Please print clearly.***

Your Name: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

*Signature:* \_\_\_\_\_

*Telephone:* \_\_\_\_\_

*Email:* \_\_\_\_\_

*Company/Position: (Enclose business card if possible)* \_\_\_\_\_

\_\_\_\_\_

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*Please return this form to:*

*The Max and Marion Caldwell Foundation • PO Box 1653, Capitola, CA 95010*