

Emmaus of Santa Barbara

OPERATION: BREAK THE CYCLE!

Recommendation Form

To the Applicant: Please fill in your name and the positions for which you are applying. Give this form to the person recommending you with a stamped and addressed envelope.

Dear Referrer:

_____ has applied for the following position
(APPLICANT NAME HERE)

_____ with **OPERATION: BREAK THE CYCLE!**,
(POSITION APPLIED FOR HERE)

Campership Institute. (Program Participant, Staff Counselor)

These positions require a high level of maturity, organization, creativity, and enthusiasm. Your recommendation will help us evaluate the applicant based on these areas. It is very important that you return this completed form to us no later than:

October 15

Emmaus of Santa Barbara
 Attn: Program Director
 P.O. Box 40511
 Santa Barbara, Ca 93140-0511
 Fax: 805.565.0815

Please use the following scale to rate the applicant (circle your choice) in the following areas:

	0=N/A (unknown)	1=Poor	2=Weak	3=Average	4=Strong	5=Outstanding
Communication	0	1	2	3	4	5
Maturity	0	1	2	3	4	5
Ability to function as a member of a Team	0	1	2	3	4	5
Ability to Lead by example/inspire others	0	1	2	3	4	5
Ability to work with minimal supervision	0	1	2	3	4	5
Organizational Skills	0	1	2	3	4	5
Ability to complete tasks correctly and on time	0	1	2	3	4	5
Ability to keep confidence	0	1	2	3	4	5
Ability to relate well to those different from him/herself	0	1	2	3	4	5
Diplomacy in difficult situations	0	1	2	3	4	5
Ability to handle stress	0	1	2	3	4	5
Creativity	0	1	2	3	4	5

In general how would you recommend this person for this position:

Recommend highly

Recommend

Recommend with the following training: _____

Do not recommend

How long and under what capacity have you known the applicant? _____

What personal qualities or abilities will the applicant bring to individual AND group work?

If applicable, describe a situation where the student utilized conflict resolution skills.

Referrer's Name (please print) _____ Title _____

Signature _____ Date: _____

Please return form to ESB, P.O. Box 40511 Santa Barbara, Ca 93140-0511 or Fax to 805.565.0815 no later than October 15. Thank you.