

Twin Rocks Friends Camp and Conference Center
Recommendation for Employment
 To be completed by an Employer
 (or teacher, if no employer)

This first section to be completed by the applicant:

Applicant's Name _____ Phone Number _____
 Address _____ City _____ State _____ Zip _____
 Position Applying for _____ e-mail _____

The above named person is applying for employment at Twin Rocks Friends Camp. The personal information requested below will supplement that provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics.

The early return of this form will be appreciated as it will expedite the processing of this candidate's application. Any information which you may give us will be regarded as strictly confidential. Please send this form directly to Twin Rocks Friends Camp.

1. How long have you known the applicant? _____ In what capacity? _____

2. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the Time	Some of the Time	Not Often	Hardly Ever
Able to follow instructions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loyal.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An able leader of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to cope with other's problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

___ Emotional Maturity	___ Sense of Humor	___ Willingness
___ Tact	___ Initiative	___ Attitude toward authority
___ Dependability	___ Courtesy	___ Attitude toward hard work
___ Judgment	___ Initial Impression	___ Public speaking ability
___ Punctuality	___ Ability to make friends	___ Honesty and personal integrity

4. Please list one strength and one weakness of the applicant: _____

5. Please choose 2-3 adjectives that best describe the applicant.

6. Please check your choice of recommendation:

- I strongly recommend
- I recommend
- I recommend with some reservation
- I do not recommend

7. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Twin Rocks Friends Camp.

Your Name (please print) _____ Date _____

E-mail _____

Address _____ City _____ State _____ Zip _____

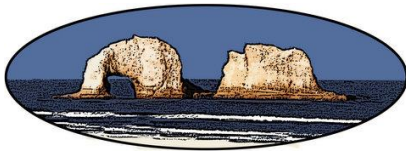
Position/Organization _____ Phone _____

Signature _____

Thank you for your assistance!

Return To:

Personnel Office
Twin Rocks Friends Camp
PO Box 6
Rockaway Beach, OR 97136
(503) 355-2284 Fax: (503) 355-8341



Twin Rocks Friends Camp and Conference Center
Recommendations for TRFC Summer Staff
 To be completed by a mentor or teacher

This first section to be completed by applicant:

Applicant's Name _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Position Applying for _____ e-mail _____

The above named person is applying for year round staff at Twin Rocks Friends Camp. The personal information requested below will supplement that provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics.

The early return of this form will be appreciated as it will expedite the processing of this candidate's application. Any information which you may give us will be regarded as strictly confidential. Please send this form directly to Twin Rocks Friends Camp.

1. How long have you known the applicant? _____ In what capacity? _____

2. Is the applicant a Christian? _____ For approximately how long? _____

3. Does the applicant appear to be growing in his/her Christian experience? _____ Please explain. _____

4. Does the applicant take an active interest in Christian service? _____ Please explain. _____

5 Have you seen the applicant in response to understanding the Scriptures, witnessing, and prayer life? _____

6. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the Time	Some of the Time	Not Often	Hardly Ever
Able to follow instructions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loyal.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An able leader of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistent in Christian testimony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to cope with other's problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

___ Emotional Maturity	___ Sense of Humor	___ Willingness
___ Tact	___ Initiative	___ Attitude toward authority
___ Dependability	___ Courtesy	___ Attitude toward hard work
___ Judgment	___ Initial Impression	___ Public speaking ability
___ Punctuality	___ Ability to make friends	___ Honesty and personal integrity

8. There is a possibility that the applicant would be employed as a camp counselor. Would you consider the applicant qualified to counsel your child or teenager? Yes No

9. Please list one strength and one weakness of the applicant: _____

10. Please choose 2-3 adjectives that best describe the applicant: _____

11. Please check your choice of recommendation:

- I strongly recommend
- I recommend
- I recommend with some reservation
- I do not recommend

12. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Twin Rocks Friends Camp.

Your Name (please print) _____ Date _____

E-mail _____

Address _____ City _____ State _____ Zip _____

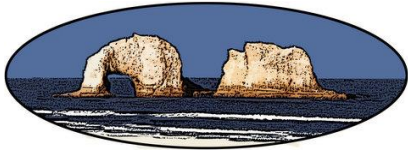
Position/Organization _____ Phone _____

Signature _____

Thank you for your assistance!

Return To:

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Rockaway Beach, OR 97136
(503) 355-2284 Fax: (503) 355-8341



Twin Rocks Friends Camp and Conference Center
Recommendations for TRFC Summer Staff
 To be completed by A Pastor or Christian Worker

This section to be completed by applicant:

Applicant's Name _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Position Applying for _____ e-mail _____

The above named person is applying for year round staff at Twin Rocks Friends Camp. The personal information requested below will supplement that provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics.

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2. Is the applicant a Christian? _____ For approximately how long? _____

3. Does the applicant appear to be growing in his/her Christian experience? _____ Please explain. _____

4. Does the applicant take an active interest in Christian service? _____ Please explain. _____

5 Have you seen the applicant in response to understanding the Scriptures, witnessing, and prayer life? _____

6. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

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Loyal.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Consistent in Christian testimony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Inclined to criticize others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

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12. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Twin Rocks Friends Camp.

Your Name (please print) _____ Date _____

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Address _____ City _____ State _____ Zip _____

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Signature _____

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