

# CAMP RAMAH IN CANADA

The Max and Beatrice Wolfe Campus

מחנה רמה בקנדה

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## STAFF REFERENCE FORM

\_\_\_\_\_ HAS APPLIED TO BE A STAFF MEMBER AT CAMP RAMAH IN CANADA.  
PLEASE FILL OUT THIS FORM, GIVING YOUR FRANK ESTIMATE OF THIS CANDIDATE. YOUR  
PROMPT REPLY WILL BE APPRECIATED GREATLY.

### A. WORK HABITS

	Poor	Average	Good	Superior
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>CO-OPERATION WITH:</b>				
Supervisors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Have you seen applicant work with children? In what capacity? \_\_\_\_\_

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Please comment on applicant's rapport with children: \_\_\_\_\_

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Please comment on applicant's responsibility with children: \_\_\_\_\_

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C. Is applicant able to comprehend spoken Hebrew? \_\_\_\_\_

Is applicant able to express him/herself in Hebrew? \_\_\_\_\_

D. Is applicant involved in Jewish communal life? \_\_\_\_\_

Is applicant familiar with Jewish rituals and sources? \_\_\_\_\_

E. List special skills and talents (Music, Dance, Art, Swim, etc.) \_\_\_\_\_

F. Please give an overall evaluation in which you include any specific weaknesses of the applicant:

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G. Would you hire applicant to work with and educate children? \_\_\_\_\_

H. Your relationship to applicant: \_\_\_\_\_

Number of years you have known the applicant: \_\_\_\_\_

Position occupied by the applicant: \_\_\_\_\_

Your name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Position: \_\_\_\_\_

Organization: \_\_\_\_\_

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

Date: \_\_\_\_\_