



GO TELL Camp Internship Program Intern Reference Form

You have received this form because the student who gave it to you values your opinion.

This student is applying for a summer internship position with GO TELL Student Camps.

If selected, this applicant will receive up to a one-year tuition scholarship to the school of their choice. We value you as a reference concerning the applicant's character and aptitude for working with a team of other students to serve GO TELL campers, youth leaders, speakers, and staff.

Please type or print neatly

Name of GO TELL Intern Applicant: _____

Person Giving Reference: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

In what capacity do you know the applicant?

Pastor

Youth Leader

Teacher

Coach

Family Friend

Employer

Other: _____

How long have you known the applicant? Years _____ Months _____

How well do you know the applicant? _____

Surface Level 1 2 3 4 5 6 7 8 9 10 Extremely Well

What level of communication have you had with the applicant in the last year?

Minimal

Some

Significant

Very Personal

Please list three positive and three negative traits/adjectives that describe the applicant and explain how those traits might help or hinder their effectiveness while working for GO TELL:

Positive:

1) _____

2) _____

3) _____

Negative:

1) _____

2) _____

3) _____

Please indicate which statement best describes the applicant:

(Leave blank if you cannot answer)

Peer Relationships:

- Very popular
- Makes friends easily
- Slow to make friends
- Generally avoided
- Other: _____

Family Relationships:

- Healthy and supportive
- Healthy, but not supportive
- Dysfunctional, but supportive
- Dysfunctional and not supportive
- Other: _____

Relationships with the Opposite Sex:

- Relates well
- Feels at ease
- Sensitive/considerate but awkward
- Insecure
- Insensitive
- Other: _____

Social Relationships:

- Socially adept
- Well-mannered
- Average
- Awkward in social relationships
- Avoids social relationships
- Other: _____

Interpersonal Relationships:

- Overbearing
- Outgoing/friendly
- Average
- Reserved
- Loner
- Other: _____

Please indicate which statement best describes the applicant:

(Leave blank if you cannot answer)

Response to Stress/Pressure:

- Copes well
- Adapts slowly
- Dominates situation or people
- Becomes overly critical of others
- Withdraws socially or emotionally
- Other: _____

Self-Assurance:

- Confident
- Average
- Needs improvement
- Insecure
- Other: _____

Level of Spiritual Maturity:

- Mature and consistent
- Maturing Christian; fairly consistent
- Growing; showing signs of maturity
- Up and down; inconsistent spiritual experience
- Demonstrates spiritual immaturity
- Other: _____

Ability to Work with Supervisors:

- Independent worker; able to take directions and go
- Cooperative in most situations
- Rebellious spirit; likes to do his/her own things
- Other: _____

Ability to Work with Peers/Team Members:

- Works well with others
- Has average ability to work with others
- Sometimes has difficulty interacting
- Has problems working with others
- Other: _____

Supervision Needs:

- Needs little close supervision; only needs direction
- Does well with regular, routine supervision
- Needs accountability and encouragement to accomplish tasks
- Needs excessive supervision
- Other: _____

Ministry Ability:

- Could minister to students alone
- Could minister to students with a team
- Could serve in either setting
- Should not minister to students
- Other: _____

On a team of 20-30 peers, this person would MOST likely be:

- The leader
- A supportive team member
- A low-initiative follower

On a team of 20-30 peers, this person would LEAST likely be:

- The leader
- A supportive team member
- A low-initiative follower

Please provide any additional information below which you think may be helpful to us as we consider this applicant.

Signature: _____ Date: _____

****Your prompt cooperation by completing and returning this form within 7 days of receiving it is greatly appreciated. Be assured that your response will be held in strict confidence. ****

Mail to:
GO TELL Ministries
P.O. Box 2138
Duluth, GA 30096

Contact us:
1-866-I-GO-TELL
info@gotellministries.com
www.gotellministries.com