

PIONEER CAMP ALBERTA 2018 L.E.A.D. REFERENCE FORM

The individual below has applied to the L.E.A.D. Program at Pioneer Camp Alberta and has given your name as a reference. Please complete this form and **return to the applicant in a sealed envelope**. The applicant's application form cannot be processed without this reference so it is very important that you complete it ASAP and return it to the applicant.

Thank you for your prompt attention to this reference. (Please submit additional pages if needed.) Name of Applicant: How long have you known the applicant? In what capacity? Do you feel the applicant has a committed and growing relationship with Jesus? □ Yes □ No Unsure What evidence do you see to support your assessment? The L.E.A.D. program at Pioneer Camp Alberta is an intense and demanding experience. Time is spent in Bible study, character development, being mentored and working with school and church groups. Please comment on the applicant in the following areas: Emotional: Physical: _____

Spiritual:
Work Habits:
How would you describe the applicant?
What is an area where the applicant could grow? _
Have you any reason for lack of confidence or hesitation in recommending this applicant?
Please explain:
Name:
Position:
Phone:
Email:
Signature:
Date:
May we contact you for further information if required? ☐ Yes ☐ No
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Thank you for your help in making Alberta Pioneer Camp a better place!