Please note: some users have had problems saving this form. Before you fill it out completely, test that form data will save. If form data clears when saved, instead "print" the document as a PDF. Thank you for your patience as we troubleshoot this issue.

PERSONAL REFERENCE

2017 BACKCOUNTRY TRAILS PROGRAM

Directions: Please complete this form in its entirety. Email it as an attachment to: Backcountry.Trails@ccc.ca.gov. The email subject line **MUST** state the applicant's name for whom you are giving the reference. The deadline for us to receive this form is ***5:00pm (Pacific Time), Wednesday, 2/15/17.***Late reference forms will result in disqualification of the applicant. For more information about the Backcountry Trails Program and the duties of the corpsmember position go to www.ccc.ca.gov/go/backcountry.

NAME OF APPLICANT:

Name of Reference:	Relationship to Applicant:
Reference Email:	Reference Phone #:
How long have you known the applicant:	

PLEASE COMMENT ON THE FOLLOWING AREAS:

1. Describe this applicant's ability to get along with others, especially those different than her/him.

2. Please describe how the applicant responds to stressful situations (is the applicant unusually temperamental or easily frustrated?)

3. Describe how the applicant responds to being out of their "comfort zone" and/or in a completely new, unfamiliar setting or environment.

4. Describe applicant's ability to handle disagreements and resolve conflict effectively.

5. What personal qualities does this applicant have that will help him or her be successful in our program?

6. What are some shortcomings of the applicant?

7. Please speak to this applicant's trustworthiness and integrity.

8. Please provide any other information which you believe the Selection Panel should consider regarding this applicant:

Checking this box and entering your name below will be considered the same as a written signature.

☐ SIGNATURE _____ DATE _____