



Staff Reference

The applicant listed below is applying to work at Camp Chatterbox, a weeklong program for children ages 5-15 who use AAC devices. We would appreciate your help in providing us with an accurate assessment of the applicant's personality, ability, maturity and performance. Please complete and return this reference form to: Joan Bruno, Ph.D., CCC-SLP, Children's Specialized Hospital, 150 New Providence Road, Mountainside, NJ 07092.

Applicant's Name: _____ Date: _____

Personality: _____

Ability: _____

Maturity: _____

Performance: _____

Ability to get along and work well with others: _____

If you were responsible for completing a difficult project, would you want this person as part of your staff? _____ Yes _____ No _____ Not Sure

Additional Comments: _____

Name of person providing reference (print/sign): _____

Relationship to applicant: _____

Address: _____

Phone Number: _____ E-mail: _____