



Camp Counselor Recommendation Form

_____ is applying as a Camp Counselor at the Harford County 4-H Camp (2027). The Camp Directors would like your input regarding this individual's abilities to fulfill the responsibilities of being a Camp Counselor. The information you include will not be shared with the applicant. Please complete this recommendation based upon your knowledge and/or observation. Thank you for your assistance.

Qualities	Excellent	Good	Fair	Poor	Unknown
Responsibility	☐	☐	☐	☐	☐
Communication Skills	☐	☐	☐	☐	☐
Respect for Others	☐	☐	☐	☐	☐
Leadership	☐	☐	☐	☐	☐
Dependability	☐	☐	☐	☐	☐
Enthusiasm	☐	☐	☐	☐	☐
Flexibility	☐	☐	☐	☐	☐
Patience	☐	☐	☐	☐	☐
Initiative	☐	☐	☐	☐	☐
Resourcefulness	☐	☐	☐	☐	☐
Ability to work with children	☐	☐	☐	☐	☐
Ability to work with teens	☐	☐	☐	☐	☐
Ability to work with adults	☐	☐	☐	☐	☐
Involvement in school/community activities	☐	☐	☐	☐	☐
Problem Solving	☐	☐	☐	☐	☐

How long have you known this candidate, and in what capacity?

Type text here

Please add any additional comments you may have about this applicant that may assist the Camp Directors in the selection process. Please use a separate sheet of paper if necessary.

Signed: _____ Date: _____

Please return no later than December 12, 2027.

You may return the form to the applicant in a sealed envelope, by mail to the address below, or by email to kbtaylor@umd.edu

For questions, please contact Karen Taylor, 410-638-3255 or kbtaylor@umd.edu

Harford County Extension

Atten: Karen Taylor

3525 Conowingo Rd, Suite 600

Street, MD 21154

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