



Youth Delegate Reference Form

Children's International Summer Villages, Inc.

YDRF.02

The following is a recommendation for _____ who is a youth applicant for a CISV program.
(first and last name)

The youth is applying for: (Check one)

- Village (Month-long peace education residence camp for 11 year olds)
- Summer Camp (Three-week peace education residence camp for 13-15 year olds)
- Interchange (Peace education exchange program for 12-15 year olds)

The youth applicant will be representing the United States and his/her own state and region in an international setting. The local Chapter of CISV requests your help in identifying an applicant who exhibits leadership qualities and can represent his/her own culture successfully in that setting. Please complete the form and return it by mail to the Chapter contact person identified below.

This form is due by: _____. Please return form to:

Chapter contact person phone number: 215-694-4406
kristinlowery@me.com

Kristin Lowery/Alya Sherman - CISV
PO Box 4035
Rydal, PA 19046

Name of adult completing this reference form: _____

Occupation: _____ Home Phone: _____

Capacity in which you know the youth applicant: _____

If you are the child's current teacher, please include your school name and phone number: _____

Length of time you have known the child: _____

Please check the traits you consider to be characteristic of this applicant. Then circle the five adjectives you feel describe the applicant's greatest strengths. Feel free to elaborate on any trait or any concern that would be helpful for the purposes of selecting this child for a CISV program. Keep in mind that we are looking for children who complement each other when forming program delegations. There is no set profile of a "typical" or "ideal" youth delegate.

- | | | | | | |
|---|--|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> mature | <input type="checkbox"/> independent | <input type="checkbox"/> responsible | <input type="checkbox"/> expressive | <input type="checkbox"/> accepting | <input type="checkbox"/> discerning |
| <input type="checkbox"/> shows initiative | <input type="checkbox"/> optimistic | <input type="checkbox"/> pessimistic | <input type="checkbox"/> responsive | <input type="checkbox"/> cooperative | <input type="checkbox"/> cautious |
| <input type="checkbox"/> curious | <input type="checkbox"/> attentive | <input type="checkbox"/> practical | <input type="checkbox"/> helpful | <input type="checkbox"/> participates | <input type="checkbox"/> needs coaxing |
| <input type="checkbox"/> caring | <input type="checkbox"/> spontaneous | <input type="checkbox"/> reticent | <input type="checkbox"/> open-minded | <input type="checkbox"/> respects adults | <input type="checkbox"/> respects peers |
| <input type="checkbox"/> follower | <input type="checkbox"/> leader | <input type="checkbox"/> team player | <input type="checkbox"/> fair-minded | <input type="checkbox"/> organized | <input type="checkbox"/> dependent |
| <input type="checkbox"/> creative | <input type="checkbox"/> quiet | <input type="checkbox"/> secure | <input type="checkbox"/> vivacious | <input type="checkbox"/> sensitive | <input type="checkbox"/> forgetful |
| <input type="checkbox"/> introspective | <input type="checkbox"/> friendly | <input type="checkbox"/> articulate | <input type="checkbox"/> accepted | <input type="checkbox"/> unusual | <input type="checkbox"/> sincere |
| <input type="checkbox"/> healthy | <input type="checkbox"/> confident | <input type="checkbox"/> tolerant | <input type="checkbox"/> compromiser | <input type="checkbox"/> intense | <input type="checkbox"/> mild-mannered |
| <input type="checkbox"/> patient | <input type="checkbox"/> hurried | <input type="checkbox"/> studious | <input type="checkbox"/> motivated | <input type="checkbox"/> disrespectful | <input type="checkbox"/> athletic |
| <input type="checkbox"/> artistic | <input type="checkbox"/> outgoing | <input type="checkbox"/> inward | <input type="checkbox"/> intolerant | <input type="checkbox"/> flexible | <input type="checkbox"/> follows direction |
| <input type="checkbox"/> fun | <input type="checkbox"/> conscientious | <input type="checkbox"/> shares | <input type="checkbox"/> talkative | <input type="checkbox"/> adventurous | <input type="checkbox"/> _____ |

Use this space to elaborate on any of these traits circled on the previous page or to express any concerns:

Do you know of any special talents or experiences that would help this applicant contribute to an international program? _____

To the best of your knowledge, does this applicant have any emotional or behavioral characteristics that would interfere with his/her successful completion of a CISV program? _____

Behaviors that are NOT acceptable in any CISV program include: illegal acts, alcohol/drug abuse, dishonesty, prejudice or intolerance, violence or lack of self-control, sexual contact, verbal abuse of others, and inability to handle a reasonable amount of stress.

If "yes", please explain in the space below or call the Chapter contact person at the phone number listed on the front of this form.

The information provided above has been thoughtfully and honestly given, based on my knowledge and perception of the applicant. I understand that the information will be kept confidential and will be used by the local CISV Chapter in the evaluation of the youth applicant.

Signature _____ Date _____