

Slip Slidin' Away (SSA) – Teacher Recommendation 2008

Name of Student: _____

I _____ (applicant name) am applying to SSA, a summer camp program for high school students at Chestnut Ridge Camp & Retreat Center. My signature below authorizes you to provide SSA with information about me. I release you, your organization and SSA organizers from all liability and or damage whatsoever arising there from. All information is held in the strictest confidence. I DO/ DO NOT (circle one) voluntarily waive my right to view this form as long as it is used for its stated purpose.

Applicant Signature: _____ Date: _____

The above named student has applied to participate in Slip Slidin' Away (SSA), a week-long herpetology summer camp for high school students. The program is hands-on ecological fieldwork, exploring the hardwood forest around Chestnut Ridge Camp and Retreat Center. Accepted applicants will receive:

- An all expenses paid weeklong residential summer herpetology camp experience
- 6 follow-up field days during the academic year with lunch provided
- A book stipend & a membership in the NC Herpetological Association
- A \$200 stipend after successful completion of the camp week and 6 follow-up days

SSA is open to students entering grades 9 through 12 for the 2008-09 school year. In order for us to offer the experience to students who stand to benefit the most, we appreciate you taking the time to offer your candid assessment of this student's interest and aptitude in science. **Thank you** for taking the time to complete this form.

Person Completing this Recommendation: _____

In what capacity have you known this student? _____

How long have you known this student? _____

<u>Evaluation</u>	Excellent	Very Good	Good	Fair	N/A
Attitude	-	-	-	-	-
Integrity	-	-	-	-	-
Maturity	-	-	-	-	-
Patience	-	-	-	-	-
Creativity	-	-	-	-	-
Leadership Ability	-	-	-	-	-
Work Ethic/Habits	-	-	-	-	-
Team Player	-	-	-	-	-
Adaptability	-	-	-	-	-
Accepts direction well	-	-	-	-	-

State briefly the strengths that this student has and potential contributions that this student may make to our program:

Are there compelling reasons why this student should be selected to participate in SSA? If so, please elaborate: _____

Do you have any reservations you have about this student (does he/she work well with others, is he/she responsible, reliable and dependable, healthy and able to participate in an outdoor program amid heat, humidity and insects)? If so, please explain. _____

Signature: _____ Date: _____

Please mail or fax to: Chestnut Ridge Camp & Retreat Center, 4300 Camp Chestnut Ridge Rd, Efland, NC 27243. Fax: 866-372-5801. Questions, please contact Rhonda Parker (919) 338-2820 or rhonda@campchestnutridge.org