



NWT Youth Ambassador Program 2016-2017

Form B: Reference Form

APPLICANT INSTRUCTIONS: Below, fill in your name and give this form to a teacher or other adult outside of your family who knows you well. Ask the reference to fill out the form. Either yourself or the reference can send the reference form to Dawn Moses by December 9, 2016.

E-mail: Dawn.Moses@gov.nt.ca; Fax: 867.920.6467

APPLICANT NAME:

First Name

Last Name

FOR THE REFERENCE: The NWT Youth Ambassador Program provides a guided and structured volunteer experience for NWT youth at major events to develop significant life and job skills and build their confidence. Participant training focuses on volunteer and leadership skill development. Please be honest when telling us about this youth. If you would like to add additional comments, we encourage you to do so.

Please indicate your opinion of this applicant's ability to meet the challenges of this program. Check one:

☐ I strongly recommend this applicant
☐ I recommend this applicant
☐ I have minor concerns about recommending this applicant
☐ I have major concerns about recommending this applicant

Write a response to the following questions. Either use the space available or write answers on another sheet if you need more space.

1. How long, and in what way, have you known this applicant?

2. What are the applicant's areas of strength **and** areas for growth? **Please describe both.**

a)

b)



3. Please describe the applicant's behavior in respect to authority and peer relationships, as best as you can.

4. Do you think the applicant adapts well to unfamiliar environments and new situations? Why or why not?

Name (printed): _____

Signature: _____

Relationship to Applicant: _____

Date: _____