



Camp Stella Maris of Livonia, Inc.

4395 East Lake Road Livonia, New York 14487 Tel: 585-346-2243 Fax: 585-346-6921 www.campstellamaris.org

Camp Stella Maris Counselor in Training (CIT)

Letter of Recommendation Form

The applicant has applied for the CIT program at Camp Stella Maris. CITs spend week one learning and growing skills needed to work in a camp environment. During week two of the program, CIT campers will have the opportunity to use their strengths and tools in a cabin, at day camp, or in the kitchen, assisting camp staff with daily camp tasks and/or supervision of campers of all ages and backgrounds. Your honest response to the following questions about the applicant's character and ability would be most helpful. All information will be kept confidential.

Complete this form and return to Camp Stella Maris postmarked by December 31, 2024. Please mail letter of recommendation to the address below, or scan and email to melissa@campstellamaris.org.

Camp Stella Maris
Attn: (Applicant Name) -CIT Application
4395 E. Lake Rd.
Livonia, NY 14487

Please attach additional pages if needed.

1. What is your relationship with the candidate and how long have you known them?
2. What do you respect most about the applicant?
3. What behaviors could they change (or improve upon) to be more effective in working with peers?
4. Do you have any reservations about the applicant's ability to work closely with peers and children? Please explain.
5. What can you tell us about the applicant's dependability and level of initiative?

Built on a foundation of faith and a century of tradition, Camp Stella Maris provides memorable experiences within our vibrant community of belonging, connections, and joy. We accomplish this by inspiring positive growth and empowering people of all ages.



United Way
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6. What can you tell us about the applicant's self-awareness, self-regulation and ability to accept criticism during stressful situations?

7. Is there anything else you would like to share about this applicant?

CIT Applicant's Name: _____

Your Name: _____

Signature: _____ Date: _____

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