



# 2010 CAMP RECOMMENDATION FORM

Thank you for taking the time to complete our Camp Recommendation Form. The information provided is used to gain a deeper understanding of the potential camper's artistic skills, individual skills, how they relate to peers and adults, and how the child will benefit from participation in the Camp. If you have any questions please contact Myanna Adams, Assistant Camp Director at 416-558-0922 or [myanna@horizonartscamp.org](mailto:myanna@horizonartscamp.org).

Please complete each section in full. Incomplete forms may cause a delay in processing your recommendation. The completed form can be emailed to [myanna@horizonartscamp.org](mailto:myanna@horizonartscamp.org) or sent via mail.

### CAMPER/LIT/CIT INFORMATION

First & Last Name of the child you are recommending: \_\_\_\_\_

### REFEREE INFORMATION

First & Last Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Organization/School: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: ON \_\_\_\_\_ Postal Code: \_\_\_\_\_

How long have you known the child? \_\_\_\_\_

In what capacity do you know/work with the child: \_\_\_\_\_

Please indicate where you feel this child ranks in the categories listed below. If you are unsure where a child would rank in a particular category because you have not observed the skill, please leave it blank.

	Can Improve	Good	Very Good	Excellent
Creativity/Originality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works co-operatively with peers & adults:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation (work ethic) & Enthusiasm:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance and punctuality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Potential:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates an active interest in the arts:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a positive attitude towards learning:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Existing skill level in music:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Existing skill level in theatre:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Existing skill level in dance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Existing skill level in visual arts:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the main strengths of the child?

What are the areas of improvement for the child?

Are there behavioural problems at home or at school that you are aware of?

Yes

No

If YES, please explain:

Is the child experiencing stressful or difficult life situations (divorce, death in the family, family job loss etc.)?

YES

NO

If YES, please explain:

Does the child have any of the following (check all that apply):

ADD/ADHD

Learning Disabilities

Autism Spectrum Disorder

Epilepsy

Diabetes

Mental Health Concerns

Physical Challenges

History of Abuse/Domestic

Other

(i.e., Vision impairment, chronic injury)

Violence

If you selected any of the above please explain:

How would the child benefit from participation in Horizon Arts Camp?

Please use the space below to provide any additional information you would like to share about the child you are recommending to Horizon Arts Camp:

In signing this form, you are ensuring that all answers are completed and accurate to the best of your knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The Assistant Camp Director will conduct follow up phone calls with all recommendations once the camper application and Recommendation Form is received. **Recommendation Forms are kept confidential and should be mailed or emailed directly to the camp office. Camper applications are not processed without the Recommendation.** Please send to: myanna@horizonartscamp.org or via mail to: Horizon Arts Camp • 386 Elm Road • Toronto, ON • M5M 3W1

**Page 2:** Name of Child: \_\_\_\_\_