

4-H Camp Shankitunk

A full description of this campership is available on our web sites at
www.ccedelaware.org OR www.campshankitunk.org



CAMPERSHIP RECOMMENDATION FORM

Cornell Cooperative Extension of Delaware County is currently accepting applications for **The Owen Kelly Memorial Campership** at 4-H Camp Shankitunk. You have been selected to provide a reference for _____ . Applicants are required to submit one short letter of recommendation from a teacher, 4-H leader, clergy, or friend of the family explaining how camp will help them (a child with high potential) to grow as a leader, learn skills, and make friends at camp, when they may not otherwise have the opportunity to do so. Your assistance in this process is greatly appreciated.

1. How long have you know the applicant? _____
2. In what capacity do you know the applicant?
_____ Teacher _____ 4-H Leader _____ Clergy _____ Family Friend

3. In your opinion, how will camp help this child with high potential to grow as a leader, learn skills, and make friends at camp, when they may not otherwise have the opportunity?

Name: _____ Telephone Number: (____) _____

Email: _____ Date: _____

PLEASE RETURN DIRECTLY TO:
CORNELL COOPERATIVE EXTENSION OF DELAWARE COUNTY
ATTN: Cathy Scofield
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