



MAYOR'S YOUTH CORPS
CITY OF TAMPA

Reference Form

Applicant Name: _____

Reference Name and Title: _____

Reference Email Address: _____

Reference Phone: Work Home Cell Other: _____

Organization/Affiliation: _____

How long have you known the applicant? _____

In what capacity? _____

What would you consider to be the applicant's strengths? _____

What would you consider to be the applicant's weaknesses? _____

Please rank the applicant on the following qualities with 5 being highly qualified and 1 being unqualified.

Quality	1	2	3	4	5	NA
Consistently Reliable						
Takes the initiative						
Shows strong leadership skills						
Has good time management skills/meets deadlines						
Ability to express themselves						
Confident in working with a variety of people						
Goes above and beyond						
Would be a good choice for the Mayor's Youth Corps						

(You may include another attachment should you need additional space for comments.)

Thank you for filling out this recommendation form.

Please attach this recommendation to an email and send to molly.biebel@tampagov.net

Forms can also be mailed to:

Molly Biebel, MYC Coordinator

3402 West Columbus Drive, Tampa, FL 33607

REFERENCES MUST BE RECEIVED BY OCTOBER 21, 2021