

CAMP RAMAPO  
RHINEBECK, NY 12572-0266  
(845) 876-8403

## PROFESSIONAL REPORT

Camp Ramapo is a therapeutic residential summer program, which serves children with emotional, behavioral, and learning problems. Please complete and return this report immediately, so that we can consider the camper's application in a timely matter.

Bernie Kosberg  
Executive Director

Michael Kunin  
Camp Director

Camper's name: \_\_\_\_\_

Sex: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

School or agency: \_\_\_\_\_

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

Person completing report (please print): \_\_\_\_\_

Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_ Hours can be reached: \_\_\_\_\_

What services does this child receive from you? Please describe (type, frequency, duration, goals, etc.):

What is the primary aim of your work with this child?

Why are you referring this child to a therapeutic program serving children at risk?

Physical Characteristics (size, weight, vision limitations, etc.):

Medication? If so, please describe type and reason:

Child's strengths, interests, and talents:

Please comment on this child's learning and behavior problems.

Briefly describe the child's family and any important issues we should be aware of:

Please rate the following (above average, average, below average):

Verbal expression:

Following directions:

Attitude towards learning:

Intellectual potential:

Honesty:



**Responsible Behaviors** (stays away from dangerous situations, respects others' space and privacy, follows directions, etc.)

*Excellent*

*Good*

*Fair*

*Poor*

**Attitude and Adjustment** (likes to try new things, tries again - even when frustrated, etc.)

*Excellent*

*Good*

*Fair*

*Poor*

Which of the following activities/times of day may be difficult for this child at Camp?  
(Please check as many as you would like.)

Wake up

Nature/woods activities

Helping to clean up his/her area in the cabin

Athletics activities

Meals (eaten family style)

Group games

Swimming

Listening to a story

Boating

Small group instruction

Arts and crafts activities (general, ceramics, woodcraft)

Playground time

Music/drama activities

Moving from one activity to the next

Rest hour (campers are not required to sleep, but are asked to stay quietly on their beds)

Showering

Bedtime

Please explain your reason(s) for checking the above items.

Under what circumstances does this child become stressed or frustrated?

**Applicant Name:** \_\_\_\_\_

What are the most successful ways to manage this child's behavior when s/he is presenting difficulty?

What are 3 skills you would like this child to learn in order to be more successful at home and/or school?

1.

2.

3.

**Please provide any other information you feel is important for us to know. You may use the other side of this page or attach additional sheets if necessary.**