



**CONGRESSIONAL COALITION ON ADOPTION INSTITUTE  
2019 FOSTER YOUTH INTERNSHIP PROGRAM®  
PERSONAL RECOMMENDATION**

**TO THE APPLICANT.** Please complete the top portion of this form before giving it to the recommender. You will need to secure one **personal** reference which can include a mentor, advisor, neighbor, coach, etc.

Name of Applicant: \_\_\_\_\_

I request that \_\_\_\_\_ complete this recommendation form for my application to the Congressional Coalition on Adoption Institute’s 2019 Foster Youth Internship Program®.

**TO THE RECOMMENDER.** The Congressional Coalition on Adoption Institute’s (CCAI) Foster Youth Internship (FYI) Program® is a highly esteemed Congressional Internship for young adults who have spent at least 24 consecutive months and/or at least a total of 36 months in the U.S. foster care system. Also, all applicants must have completed four semesters of schooling at an accredited institution of higher learning, such as a college, university, or vocational school. Participants will be placed in the Washington, DC offices of Members of Congress. The FYI Program began in 2003 as an effort to raise awareness to federal policymakers of the needs and unique perspectives of young adults who have spent time in foster care. In addition, CCAI organizes retreats, advocacy trainings, and networking opportunities. These combined experiences allow the interns to create a policy recommendation report that is presented at a congressional briefing and released to policymakers and advocates across the country.

**PART 1.** Please evaluate the applicant on each of the following characteristics. As you complete the evaluation, please provide your honest and objective appraisal of this applicant’s ability to demonstrate the below criteria in both a congressional/professional setting and in an informal personal setting.

	<b>1</b> Exceptional	<b>2</b> Outstanding	<b>3</b> Good	<b>4</b> Average	<b>5</b> Below Average	<b>N/A</b> Not Observed
Flexibility						
Motivation						
Communication						
Maturity						
Group Interaction						
Leadership						
Positive Attitude						

**PART 2.** Please submit a one-page, signed letter of recommendation on behalf of the applicant. To help match recommendations to applicants, please save the letter and form respectively as “Applicant Last Name, First Name\_PersonalRec\_Letter/Form\_FYI2019”.

**PART 3.** I recommend this applicant for the highly esteemed Foster Youth Internship Program®:

Not at All		Minimally			Moderately			Enthusiastically			
0		1	2	3	4	5	6	7	8	9	10

**Please email this form and letter of recommendation in PDF format with the subject line, “Last Name of Applicant: Personal Recommendation” to CCAI’s Director of Programs, Kate McLean, at fosteryouthinternship@gmail.com on or before January 10, 2019 by 11:00PM EST. Thank you.**

Print Name: \_\_\_\_\_

Relation to Candidate: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

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

Date: \_\_\_\_\_