

3. Given your relationship with the individual what do you perceive to be the most challenging aspect of this experience for the applicant?

4. Additional comments.

Please print your name: _____

Your signature: _____ **Date:** _____

Please place in a sealed envelope and return to the applicant who will submit it with their application packet.

**Mailing address: Haiti Plunge, Inc.
P.O. Box 376
Adams, MA 01220**