

VOLUNTEER REFERENCE FORM

Name of Applicant: _____

Date: _____

Please complete this reference form in regard to the applicant's suitability to volunteer at Gateway Woods, a residential facility for adolescents. We appreciate your honest opinion and hope that you will feel free to express any concerns that you may have. If you wish to further discuss any issues, please call the Volunteer Coordinator at (260) 627-2159. Thank you for your assistance.

Name: _____

Phone: _____

Address: _____

Relationship to applicant: _____

Length of time acquainted: _____

1. Please list strengths and weaknesses of the individual.

Strengths:

Weaknesses:

2. Evaluate the applicant. (Circle the appropriate number.)

1=almost never 2=seldom 3=sometimes 4=often 5=almost always

Social:

- Friendly 1 2 3 4 5
- Willing to forgive/apologize 1 2 3 4 5
- Discreet to opposite sex 1 2 3 4 5
- Perceptive 1 2 3 4 5

Emotional:

- Emotionally stable 1 2 3 4 5
- Patient 1 2 3 4 5
- Even-tempered 1 2 3 4 5

Spiritual:

- Faithful in Christian work 1 2 3 4 5
- Consistent 1 2 3 4 5
- Strong personal witness 1 2 3 4 5

(continued)

3. Evaluate the applicant (continued).
1=almost never 2=seldom 3=sometimes 4=often 5=almost always

Personal:

- | | | | | | |
|--------------------------------|---|---|---|---|---|
| • Confident | 1 | 2 | 3 | 4 | 5 |
| • Self-motivated | 1 | 2 | 3 | 4 | 5 |
| • Creative | 1 | 2 | 3 | 4 | 5 |
| • Ability to follow guidelines | 1 | 2 | 3 | 4 | 5 |
| • Enthusiastic | 1 | 2 | 3 | 4 | 5 |
| • Careful in speech | 1 | 2 | 3 | 4 | 5 |
| • Flexible | 1 | 2 | 3 | 4 | 5 |
| • Dependable | 1 | 2 | 3 | 4 | 5 |
| • Common sense and judgment | 1 | 2 | 3 | 4 | 5 |
| • Critical | 1 | 2 | 3 | 4 | 5 |
| • Domineering | 1 | 2 | 3 | 4 | 5 |
| • Irritable | 1 | 2 | 3 | 4 | 5 |
| • Intolerant | 1 | 2 | 3 | 4 | 5 |
| • Argumentative | 1 | 2 | 3 | 4 | 5 |
| • Cooperative | 1 | 2 | 3 | 4 | 5 |

Please add comments on any of the above.

4. Is there anything about this individual that would hinder their work with children?

Please return the completed reference form to:

Gateway Woods
Attn. Volunteer Coordinator
P.O. Box 151
Leo, Indiana 46765

Thank you for your assistance!