



VOLUNTEER PERSONAL REFERENCE FORM:

PLEASE COMPLETE THE FOLLOWING TWO PAGES AND EMAIL TO volunteer@littladiessociety.org WITH THE VOLUNTEER'S NAME AS THE SUBJECT LINE. (Add extra pages as needed.) THANK YOU!

Volunteer's Full Name: _____

Today's Date: _____

Your Full Name: _____

Your Email Address: _____

Your Phone Number: _____

Your Relationship to the Volunteer: _____

1. How long have you known the volunteer? _____

2. In what capacity do you know the volunteer? _____

3. Do you feel that the volunteer is appropriate for interaction with female children ages, 11-14, and their families? Please explain. _____

4. Does the volunteer show respect for diverse lifestyles, cultures and religions? Are there any specific examples that you can share? _____



5. Please comment on the volunteer's integrity, attitude and dependability. _____

6. What do you consider to be his/her strengths? _____

7. What are his/her areas for development and improvement? _____

8. To the extent you know, please tell us about this person's roles with children; i.e., school volunteer, youth coach, youth group leader, etc. _____

9. If you have seen him/her discipline a child, could you please describe what you saw? _____

10. Are you aware of any reason why we should not allow this person to work with children? If yes, please explain: _____
11. Does the volunteer, as far as you know, have any limitations which might impact his/her ability to perform? If yes, please specify. _____

12. Please share any additional comments about the volunteer. _____

