

Volunteer Reference Form

Applicant Information

First Name

Last Name

Suggestions for source of reference: employer, supervisor, teacher, or anyone with the ability to comment on the applicant's work ethic. Relatives may **not** act as references.

Referee Information

First Name

Last Name

Occupation

Company / Organization

Phone Number:
Email:

How long have you known the applicant?

In what capacity?

Assessment

Please comment on the following:

Applicant Strengths:

Areas for Improvement:

Ratings

Please rate the applicant in the following areas using the following scale: 5= Excellent 1= Poor

	5	4	3	2	1
Reliability and Commitment					
Interpersonal Skills					
Communication Skills					
Teamwork					

Signature & Date

Comments:

Referee Signature:

Date: mm/dd/yy

If you have additional comments or concerns, please contact us at Tel: 905-895-4521 Ext. 2590 Email: VOLUNTEERS@southlakeregional.org

Thank you.