



# Youth Volunteer Applicant Reference Check

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

Address: \_\_\_\_\_

The volunteer applicant named below has given your name as a reference and waived his/her rights provided by the Family Education Rights and Privacy Act of 1974 to inspect this letter of reference. Your assessment of the person will help us in guiding his/her involvement into a particular area of ministry on a volunteer level. This information will remain confidential. Thank you.

Applicant: \_\_\_\_\_

1. How long have you known the applicant and in what capacity?
2. Please describe this person's ability to work with people, especially children and peers.
3. What age grouping(s) do you think the applicant is best able to serve?
4. What particular gifts does the applicant bring to ministry?

5. Please rate the applicant on the following characteristics ( 1=weak; 5=strong; NK=no knowledge) :

	1	2	3	4	5	NK
Relates well with children						
Relates well with peers						
Sense of confidence in self						
Honest and open in relationships						
Witness to the Christian faith through his/her lifestyle						
Openness to new learning						
Reliability						
Ability to express oneself						
Ability to take criticism						

<b>Ability to work with superiors</b>						
<b>Ability to work as part of a team</b>						
<b>Ability to take initiative and complete a project</b>						

6. Do you feel this applicant has any problems or limitations which would impede his/her volunteering in ministry?

Please feel free to add any additional comments about the applicant.

The information I have given is accurate to the best of my knowledge.

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

Please return to: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_