



PERSONAL REFERENCE FORM
(Please Print)

FROM: _____ CONCERNING: _____

ALL INFORMATION WILL BE HELD CONFIDENTIAL IN EVERY RESPECT.

1. In what capacity have you known the applicant? _____
For how long? _____

2. Do you have knowledge of how applicant relates to children? Yes ____ No ____
If yes, please explain: _____

3. Can applicant separate personal life from volunteer work experience? Yes ____ No ____

4. List three adjectives that best describes applicant:

5. Would applicant have problems in working with any of the following:
Racial minorities Females Males Handicapped Various religious preferences

Explain: _____

6. How well does the applicant finish projects and activities begun?
Very well ____ Well ____ Average ____ Fair ____ Poor ____ Unknown ____

7. To your knowledge, has the applicant ever had a drinking or drug problem?

8. Do you feel that the applicant is in a position to make a year-long commitment to a child?
Yes ____ No ____ (explain) _____

9. Would you be comfortable having the applicant serve as a Court Appointed Special Advocate to a child?
Yes ____ No ____ (explain) _____

PLEASE USE THE BACK OF THIS SHEET FOR ADDITIONAL COMMENTS.

Signature Date