

Reference Form

Volunteer Services Dept



Name of Applicant: _____ (Last Name) (First Name)
Name of Reference: _____ Tel. # _____
Reference's Address: _____
Relationship to Applicant: _____ Date: _____

1. How long and in what capacity have you known the individual?
(i.e. supervisor, colleague, relative, friend, etc.)

2. How would you best describe the individual?

3. How does the individual get along with people (especially seniors)?

Please explain: _____

4. Could you describe some positive skills or traits of the individual?

5. Are there any areas the individual needs improvements with?

6. Would you recommend this person to our organization?

Signature: _____

Can we contact you? Yes No

If yes, when is the best time to reach you: _____

For more information, please contact the Volunteer Coordinator at 416 493 3333