



Volunteer Reference Form

Last Name	First Name	Middle Initial	
Address	City	State	Zip

Date: _____ **Regarding** _____ **(Name of volunteer)**

You have been asked by the above named person to offer a reference on his/her application to become a Mentor to youth in Clark County. This agency, using the principle of one adult helping one child, is very anxious to make certain that the applicants are well qualified. The volunteer is assigned a school-aged child who shows a need for a role model who can devote time and friendship to them. The volunteer is not to assume the role of a parent, but is to be a companion to the child and assist the child in reaching their maximum potential. The volunteer must be consistently responsible and dependable; a stable and mature individual who enjoys children and has personal characteristics that would provide a good model for a young person. We look for an individual you would want to volunteer for your own child.

It will be a great help if you would carefully consider the following questions, answering them to the best of your knowledge. Please return this form to our office as soon as possible.

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

How well do you feel you know the applicant? _____



Please mark the following characteristics relating to the applicant as you know them:

	Low	Average	High
Outgoing	1 2 3 4 5 6 7 8 9 10		
Patient	1 2 3 4 5 6 7 8 9 10		
Even Tempered	1 2 3 4 5 6 7 8 9 10		
Flexible	1 2 3 4 5 6 7 8 9 10		
Assertive	1 2 3 4 5 6 7 8 9 10		
Passive	1 2 3 4 5 6 7 8 9 10		
Aggressive	1 2 3 4 5 6 7 8 9 10		

Please comment on the following areas relating to the applicant as you know them:

Attitude

Physical health

Mental health

Openness to other's values, interests, lifestyle, race, etc.

Interactions one-to-one and in group settings

Other Comments:
