

Return to: Kathryn Hill  
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**VOLUNTEER REFERENCE FORM – Three Required**

**Name of Applicant:** \_\_\_\_\_

In what capacity and for how long have you know the volunteer applicant?

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Does applicant relate well to children? Any experience with sick children? Please explain.

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What skills does the applicant possess that will enable him/her to work well in a team environment?

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What three qualities best describe the applicant?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Additional Comments:

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Reference Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_

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

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