

(Print Name of Volunteer) \_\_\_\_\_ has applied to be a volunteer in the First Baptist Church children/youth ministries and has indicated on their application that you are willing to act as a personal reference. FBC has a Children and Youth Policy, which is designed to protect our children and youth as well as our volunteers. We do a reference check on all our volunteers working in our ministries. Your response will remain confidential. Thank you for your cooperation.

Please forward this information to:

First Baptist Church  
 Attn: Chairman of Deacons  
 Box 172  
 Listowel, Ontario  
 N4W 3H2

## REFERENCE INFORMATION

Name:					
Address:					
City:		Province:		Postal Code:	
Main Phone:		Alternate Phone:		Email:	

Describe your relationship with this person:

How long have you known this person?

Please use the following scale to respond to the following:  
 1 – low 2 – below average 3 – average 4 – very good 5 – excellent

How would you rate this individual in the following areas?

Ability to work with other volunteers	1	2	3	4	5
Ability to follow through on commitments	1	2	3	4	5
Ability to relate to children or youth	1	2	3	4	5
Level of spiritual maturity	1	2	3	4	5

What are the applicant's greatest strengths?

Would you entrust the care of your child or youth to the applicant without any concern, reservation or hesitation?

Do you have concerns regarding this person working with children or youth? If so, please explain:

If you have additional comments or things you feel we should be made aware of – please add on the back of this sheet or a separate page.

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