# PERSONAL REFERENCE FORM

**This section is to be filled out by applicant.**

Name of Applicant: _____

Name of Reference: _____

This form is for the purpose of obtaining character references to volunteer at A Safe Place. This form will be kept in the applicant's volunteer file and will be confidential.

Applicant Signature: _____

Date: _____

**This section is to be filled out by the referent.**

**Please mail completed form to A Safe Place Attn. Karly Raymond 2710 17th St. Zion, IL 60099 or email to Kraymond@asafeplaceforhelp.org**

Thank you for taking time to fill out this form. Character references are an integral part of our volunteer process so please articulate the character of the applicant to the best of your abilities.

1. How long have you known the applicant? _____
2. Describe the applicant's desire to become involved with A Safe Place.
   _____
   _____
3. List 3 character traits that would make this applicant a great volunteer.
   _____
   _____
4. How have you seen this applicant commit to a long term project, goal, or situation?
   _____
   _____
5. Would you recommend this applicant as A Safe Place volunteer? Yes ____ No ___
6. Please list any additional comments here.
   _____
   _____

Name of Referent: _____ Date:_____

Signature: _____

Address: _____

Telephone: _____ Email: _____