

Volunteer's Name _____

Volunteer Reference Form

Reference Name: _____

How do you know this volunteer? (e.g., former employee, friend, etc.)

How long have you known this volunteer? _____

Please rate the volunteer, using the scale below, for the following areas:

	<u>Excellent</u>	<u>Good</u>			<u>Poor</u>
	1	2	3	4	5
Communication skills (Ability to express themselves clearly, concisely) Comments: _____					

Listening skills Comments: _____	1	2	3	4	5
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People skills (Ability to exhibit warmth, empathy, patience) Comments: _____	1	2	3	4	5
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Conflict resolution skills (Ability to be objective and non-judgmental and to bring parties to the table) Comments: _____	1	2	3	4	5
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Dependability/attendance Comments: _____	1	2	3	4	5
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Ability to remain calm when dealing with emotionally-charged and/or confusing situations Comments: _____	1	2	3	4	5
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What *strengths* or *weaknesses* does this volunteer have that might impact how he/she would perform as a Certified Ombudsman? _____

Do you have any reservations recommending this volunteer to work with vulnerable adults in the community? If yes, please explain.

Other comments: _____

Thank you for your assistance.