

**REFERENCE FORM FOR WASHINGTON STATE UNIVERSITY EXTENSION  
VOLUNTEER POSITION WORKING DIRECTLY WITH YOUTH  
(for reference by mail)**

\_\_\_\_\_ is applying to work with youths in an Extension program and has given your name as a reference.

Adults in volunteer positions help youths have fun while learning new skills, increasing their abilities to work together, managing their own activities, and developing into productive adults.

WSU Extension seeks your assistance in selecting the best qualified people to serve in volunteer roles and will appreciate your prompt completion of this reference form. All comments will be treated in a confidential manner.

How long and in what capacity or position have you known the applicant? \_\_\_\_\_

Please use this checklist to evaluate the applicant's qualities. Use the following marking system:

E – Excellent

G = Good

F = Fair

N = Unknown

\_\_\_\_\_ Understanding of children

\_\_\_\_\_ Dependability

\_\_\_\_\_ Flexibility

\_\_\_\_\_ Communication skills

\_\_\_\_\_ Sense of humor

\_\_\_\_\_ Patience

\_\_\_\_\_ Ability to organize

\_\_\_\_\_ Sense of fairness

\_\_\_\_\_ Initiative

\_\_\_\_\_ Respect for others

\_\_\_\_\_ Enthusiasm

\_\_\_\_\_ Resourcefulness

\_\_\_\_\_ Ability to complete a task

Please share your impression and knowledge of the applicant's qualifications for the position by using specific examples where possible.

1. How well does the applicant interact with children?

2. How would you rate the applicant's ability to work in a volunteer role with youths? Other adults?

3. What additional skills, abilities, and attributes does the applicant have that would be helpful in this position?
  
4. Does the applicant have any experience working with people who are developmentally disabled, from different ethnic backgrounds, from different socioeconomic backgrounds? If so, please describe.
  
5. How would you describe the applicant's ability to handle records and/or money?
  
6. How would you describe the applicant's general outlook and stability?
  
7. Would you be willing to place your child, or any other child for who you are responsible under his/her leadership? Why?
  
8. Do you know any reason why this person should NOT be considered for this position? If yes, please explain.

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

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

***THANK YOU!***

Return this form to: (county address)

Thurston County 4-H  
3054 Carpenter Road SE  
Olympia, WA 98503  
tc4h@co.thurston.wa.us

Extension programs and employment are available to all without discrimination. Evidence of noncompliance may be reported through your local Extension office.

Date received \_\_\_\_\_

06/21nrr