

Fairfax, Arlington, Loudoun

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Fax: 703.385.5176

Volunteer Reference Check

(Reference must be at least 18 and not related to volunteer)

Volunteer Name:		Volunteer Position:						
The person named above has applied to volunteer with Northern Virginia Family Service (NVFS), a private nonprofit dedicated to helping individuals and families find new paths to self-reliance and brighter futures. Volunteers are an integral to NVFS programs and services. Please answer the following questions honestly and return this form as soon as possible. All information is held confidential by NVFS staff.								
Type of Reference		☐ Professional Reference - or - ☐ Personal Reference						
Reference Name								
Relationship to Volunteer								
Phone Number and/or Ema	ail							
Date Reference Check Com	npleted							
How long have you know h	nim/her?							
How well do you know him	/her?	Very Well	Well	Somewhat	Very L	ittle		
What are the candidate's three (3)								
biggest strengths?								
Does the candidate work								
cooperatively and collaboratively								
with others? Please give example.								
How dependable is the candidate?		Very Mostly Somewhat Needs Improvement						
How well does the candidate finish		Very Well Well Average Fair Poor						
projects/responsibilities they have								
begun? Please rate and explain.								
What is at least one (1) area for improvement?								
Is there any additional infor	mation							
you would like to share about this								
candidate?								
NA/I		Highly Recommend Recommend with Reservation (please explain below)						
What is your overall		Recommend Cannot Recommend (please explain below)						
recommendation for this						V.		
candidate?								
Please rate the candidate's	display o	of the following	g qualitie	s with either "Yo	es", "Not S	Sure" or "No":		
	Yes	Not Sure	No			Yes	Not Sure	No
Punctual and reliable				Flexible				
Clear Communication				Professional &	& Accounta	able		
Able to work w/ a Team				Respectful				
Able to work independent				Attentive to De	etail			
Takes Initiative				Honest				
	Please ret	urn this form	directly to	one of our Vol	unteer Co	ordinators:	•	
Jamie Johnson Navara Cannon:			<u>, , , , , , , , , , , , , , , , , , , </u>	Paola Torres		Meagan Perkin	ıs	

Hilda Barg Shelter

ptorres@nvfs.org

Fax: 703.910.6283

Bailey's Crossroads Community Shelter

mperkins@nvfs.org

Fax: 703.379.3890

SERVE/western Prince William

ncannon@nvfs.org

Fax: 703.368.2004