



REFERENCE FORM FOR VOLUNTEERS

Instructions to the volunteer applicant:

Please fill out **section 1** of this form and send it to a referee to complete **section 2**.
Completed reference forms should be attached to the application and mailed or dropped off at the
Volunteer Department room BS 1.2736 at the Montreal Children's Hospital, (MUHC)
1001 boul. Decarie, Montreal, QC H4A 3J1

Instructions to the referee

Your name has been provided as a professional reference by the individual indicated below. This prospective volunteer would like to take on a volunteering role working with pediatric patients, families and/or employees at the Montreal Children's Hospital. The information on this form is confidential and will not be used for any other purpose than assessing the volunteer's abilities and suitability for a role within our institution.

Section 1: To be completed by volunteer applicant

Volunteer applicant's name (first & last name) _____

Volunteer applicant's signature _____

Volunteer programs(s) applied for _____
(i.e.: Inpatient care areas, Emergency department, etc.)

SECTION 2: TO BE COMPLETED BY THE REFEREE

Please note that a referee must be someone other than a friend or family member.

Referee's name _____

Relationship to applicant _____

Telephone _____ Email _____

How long have you known the *applicant*? _____

What would you say are the *candidate's* best qualities, characteristic and/or strengths?

How do you think the *Montreal Children's Hospital* will benefit from this *applicant's* volunteer contribution?

Do you consider the *applicant* to be someone who takes initiative or someone who requires more support or prompting to complete tasks? Please provide an example.

Do you have any concerns about the *applicant* working with vulnerable children?

In what areas do you feel the candidate needs improvement? Is the candidate aware of these issues?

Is there any reason you know of why the *applicant* may not be able to perform duties necessary for this volunteer position? Please explain.

On a scale of **1 to 5 (1=low 5=high)** how reliable would you consider this person? (i.e. punctual, reliable, dependable)

Please rank the following qualifications by indicating the number you believe best describes this applicant (**1 =poor; 3 =average; 5 =excellent**).

Strength of character	People skills
Ability to work independently	Flexibility
Discretion	
Would you entrust children in his or her care?	
Additional comments are welcome	

Referee's Signature _____ Date _____

