**Name:**

**VOLUNTEER REFERENCE FORM**

Please could you complete the form below and return it as soon as possible. References cannot be accepted by family members/relatives and a referees should have known the applicant for a minimum of 1 year.

|  |
| --- |
| **Please complete the following information in full. If you would like to discuss this reference form prior to completion, please contact the member of staff who sent you the form or you can phone us on xxxx thank you.** |
| **Your Name** |  |
| **Address (including postcode)** |  |
| **Telephone Number** |  |
| **How long have you known this person?** |  |
| **In what capacity do you know this person?** |  |
| **In your opinion, what are this person’s strengths?** |  |
| **Please comment on this person’s suitability a volunteer. Please refer to the attached role description** |  |
| **Do you have any other comments to make regarding this person?** |  |
| **Date:** |  |

**Could you please return the reference form by email to the member of staff who emailed it to you, thank you.**