

RECOMMENDATION FOR VOLUNTEERS

THIS SECTION IS TO BE COMPLETED BY THE APPLICANT

PLEASE PRINT

SERVICE UNIT _____

Name _____ Phone Number _____

(Include area code)

Address _____ City, State, Zip _____

Email Address _____ Position Applied for _____

This recommendation form is to be completed by supervisor of the applicant.

The above applicant has expressed an interest in volunteering in another position in Girl Scouts of Virginia Skyline. Your assistance in furnishing us with the information requested below would be greatly appreciated. All information given will be held in strict confidence. When completed, **PLEASE SIGN AT THE "X"**, fold the letter in half, and mail it to Girl Scout headquarters. We appreciate your prompt response to this inquiry. Please return within 10 working days of receipt. Thank you.

THIS SECTION IS TO BE COMPLETED BY THE SUPERVISOR OR DESIGNEE

PLEASE PRINT

Name _____ Phone Number _____

(Include area code)

Address _____ City, State, Zip _____

Email Address _____

1. How long have you known the applicant? _____
In what capacity? _____

2. Is the applicant:

A) Dependable? Yes No

If no, please explain _____

B) Trustworthy? Yes No

If no, please explain _____

3. What would you list as the applicants greatest strengths? _____

4. What would you list as the applicants weaknesses? _____

5. Does the applicant have any experience interacting with different racial/ethnic groups, religious, socio-economic groups and persons with disabilities? Yes No

If yes, in what capacity? _____

6. Have you observed the applicant interacting with adults?

Yes No If yes, in what

capacity? _____

Answer questions 7-8 only if the applicant will be working with girls in the new position.

7. Have you observed the applicant interacting with children?

Yes No

If yes, in what capacity? _____

8. Are there any factors that might compromise the safety of the girls? Yes No

If yes, please explain _____

9. List the skills and experience the applicant has that are applicable to the new position: _____

10. Is there any reason why you think the applicant should not be a Girl Scout Volunteer? Yes No

If yes, please explain _____

SUPERVISOR - PLEASE SIGN AND DATE

X _____

DATE _____



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 120 ROANOKE VA

POSTAGE WILL BE PAID BY ADDRESSEE

GIRL SCOUTS OF VA SKYLINE COUNCIL INC
3663 PETERS CREEK RD
ROANOKE VA 24019-9920



ATTN: Volunteer Management Specialist

FOLD IN HALF
