

Volunteer Resources would appreciate your assistance in providing us with a reference on behalf of the above individual, who has applied to volunteer their services. Should you prefer or be required to submit your reference confidentially, please email to volunteers@hollandbloorview.ca or 416-422-7033

To be completed by an employer, supervisor, teacher or individual who has known the applicant in a professional capacity. This reference may not be completed by a family member, friend, or friend of the family in a personal (non-work) capacity.

Name:	Job Title:
Organization:	Phone #:
E-mail (For reference contact purposes only):	
Do you have an affiliation with Holland Bloorview? Yes No	
If yes, please specify:	

How long have you known this applicant?
In what capacity? employment academic community involvement athletics
Other (please specify):

I know the applicant: very well well casually

**Please rate the following, on a scale of 1-5:
5 being Excellent - 1 being Poor – NA for unable to comment**

Commitment, reliability & punctuality		Interactions with authorities		Interactions with clients/customers	
Initiative		Attitude		Ability to communicate	
Interactions with children		Compassion		Interactions with peers	
Adaptability		Interactions with persons with disabilities			

What is a strength this person can bring to volunteering:

What is this person's area for improvement:

The volunteer role at Holland Bloorview Kids Rehabilitation Hospital involves assisting with the delivery of **clinical and educational programs** for children and young adults with disabilities or complex long-term needs. How well do you believe this person would work in this capacity?

Would you consider hiring/rehiring this person? Yes No NA

Would you entrust the care of your own children and/or children you've been entrusted the care of to this applicant? Yes No

Other comments:

I understand that any willful misrepresentation made by me in connection with this reference will be sufficient cause for the dismissal of the applicant from Volunteer Resources.

Signature:	Date:
-------------------	--------------

*Holland Bloorview could not realize its mission and vision without volunteers.
Thank you for taking the time to provide this reference.*