



VICTIM SERVICES OF HALDIMAND & NORFOLK

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VOLUNTEER APPLICATION REFERENCE

Name of Applicant: _____

1. How long have you known the applicant? _____

2. What is your relationship to the applicant? _____

3. Please briefly describe the applicant's individual strengths and weaknesses:

Strengths _____

Weaknesses _____

4. How do they cope with:

a. Stress: _____

b. Change: _____

5. Is the applicant sensitive to the needs of others? How do they show this?

6. Please add any further information or comments that would help us in deciding whether it would be in the applicant's best interest to become a crisis intervention volunteer:

7. Would you like us to telephone you regarding any concern you may have regarding this application?

Yes, I would

No, I would not

Thank you for your co-operation!

Signature

Date

Please print name

(____) _____

Telephone Number