



**Western Youth Network**  
**REFERENCE LETTER**

Dear \_\_\_\_\_:

\_\_\_\_\_ has applied to become a volunteer/mentor and has listed you as a reference. As a volunteer/mentor, the applicant would be working directly with a youth 6 to 17 year old on a one-on-one basis who has been referred to our program from either juvenile court or another youth-serving agency. All of the youth referred are in need of a caring adult in their lives to serve as friends and mature role models. The applicant would meet with the youth for a minimum of two hours a week and/or eight hours a month for a year in order to build a strong friendship. Qualities of caring, consistency, and understanding are important in all of our volunteers.

Please answer the following questions as completely and as honestly as possible. All information will be considered confidential. If you have any questions, please feel free to call the office at 264-5174

Thank you for your cooperation.

Sincerely,

\_\_\_\_\_  
Governor's One-on-One Director/Coordinator

\_\_\_\_\_  
Date

1. How long have you known the Applicant? \_\_\_\_\_
2. In what capacity have you known the Applicant? \_\_\_\_\_
3. How well do you know the Applicant?  
Very Well \_\_\_ Well \_\_\_ Average \_\_\_ Little \_\_\_ Very Little \_\_\_
4. Applicant's capacity for friendship: (check as many as are applicable)  
Sincere \_\_\_ Cool \_\_\_ Warm \_\_\_ Shallow \_\_\_  
Loyal \_\_\_ Shy \_\_\_ Unknown \_\_\_
5. How would you rate the Applicant's friendships?  
Many friends \_\_\_ Constantly changing \_\_\_ Average \_\_\_ Unknown \_\_\_
6. How would you rate the Applicant's health?  
Above Average \_\_\_ Good \_\_\_ Fair \_\_\_ Poor \_\_\_ Unknown \_\_\_
7. Check as many of the following as describes the Applicant:

Domineering\_\_\_\_\_
Happy\_\_\_\_\_
Nervous\_\_\_\_\_
Reserved\_\_\_\_\_
Friendly\_\_\_\_\_

Cooperative\_\_\_\_\_
Temperamental\_\_\_
Lacks Confidence\_\_\_
Aggressive\_\_\_\_\_
Well-Adjusted\_\_\_\_\_

Opinionated\_\_\_\_\_
Leader\_\_\_\_\_
Follower\_\_\_\_\_
Confident\_\_\_\_\_
Unhappy\_\_\_\_\_

8. Please circle the number in the scale ranging from the highest (5) to the lowest (1) which reflects your opinion of this Applicant on the following items:

Table with 2 columns of traits and a 5-point scale (5 4 3 2 1) for each. Traits include Personal Appearance, Good Judgment, Understanding of children, Responsibility, Leadership, Maturity, Flexibility, Stability, Warmth, Sympathetic, Patience, and Sincerity.

9. Do you believe this Applicant would act as a positive, stable role model for a youth?

Two horizontal lines for writing an answer.

10. Do you know of any reason why the Applicant would not serve well as a volunteer?

Two horizontal lines for writing an answer.

11. Does this Applicant have or has she/he ever had a drinking problem or drug usage?

Two horizontal lines for writing an answer.

12. Would you consider placing the responsibility of your child with this person? Why or why not?

Two horizontal lines for writing an answer.

13. To the best of your knowledge, does this Applicant have any history of child molesting?

Two horizontal lines for writing an answer.

14. Describe the Applicant's strong points in working in a one-on-one relationship with a child.

Two horizontal lines for writing an answer.

If you have any additional comments that you feel would be helpful to us, please include additional sheets.

Please remember to sign and date this reference below before returning it to the Program Director/Coordinator.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_