

Dear Friend,

I have listed you as a reference for Free Arts Minnesota, a non-profit organization where I would like to volunteer. Enclosed is a reference form for you to complete. I appreciate your time and effort in this endeavor. You can either fax the completed form to 612.338.5060 or mail it to:

Free Arts Minnesota
400 First Avenue N. Ste. 518
Minneapolis, MN 55401

Free Arts Minnesota is dedicated to bringing the healing power of artistic expression into the lives of abused, neglected and at-risk children and their families. Through art, dance, drama, poetry, music, and other creative outlets, Free Arts Minnesota volunteers help children and families to express emotions, gain self-confidence and develop positive methods of communication. In addition to providing art activities, volunteers offer adult mentorship for at-risk youth. The most important trait of a Free Arts volunteer is a compassionate commitment to children.

If you would like more information about Free Arts Minnesota, please contact the Program Coordinator, Krissy Stockton. You can email her at krissy@freeartsminnesota.org or call her at 612.824.2787.

Thank you! I appreciate your help.

Sincerely,

Free Arts Minnesota

Volunteer Reference

CONFIDENTIAL

_____ is interested in becoming a volunteer for Free Arts Minnesota and has given your name as a personal reference. Free Arts volunteers work with victims of child abuse and “at risk” families using creative arts programs.

Free Arts volunteers must be consistent, responsible, dependable, stable and mature individuals who enjoy the friendship of children and possess personal characteristics that make them good role models. We look for individuals who are capable of giving of themselves--people you would want as models for children in your own life.

Please complete this reference form and return it to the Free Arts Minnesota office in the envelope provided. The information on this form will be considered confidential and will not be shared with the applicant.

If for some reason you do not wish to recommend the applicant, your returned blank reference form will be considered a negative response in regard to our acceptance of the applicant.

We value your assistance in assessing the suitability of this applicant for a volunteer position with Free Arts Minnesota. Thank you.

Please complete the following:

Name _____

Telephone _____

Occupation _____

Address _____

How long have you known the applicant? _____

How well do you feel you know this person? _____

How would you describe this person's style with friends?

Shallow Shy Sincere Distant Warm Respectful Confident Unsure

Comments: _____

How would you describe this person's style with children?

Caring Stern Warm Distant Respectful Understanding Involved Unsure

Comments: _____

Does this person deal well with the responsibilities and problems of everyday living?
Always Usually Some of the time Rarely

Comments _____

Do you believe this person has the necessary characteristics needed to work with children?
YES NO

Please explain _____

Would you have any reservations in recommending the applicant to work with children?
YES NO

Please explain _____

How would you describe this person? Check as many of the following characteristics which apply.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Domineering | <input type="checkbox"/> Happy | <input type="checkbox"/> Lacks confidence | <input type="checkbox"/> Leader |
| <input type="checkbox"/> Tense/nervous | <input type="checkbox"/> Moody | <input type="checkbox"/> Outgoing | <input type="checkbox"/> Confident |
| <input type="checkbox"/> Follower | <input type="checkbox"/> Aggressive | <input type="checkbox"/> Cooperative | <input type="checkbox"/> Friendly |
| <input type="checkbox"/> Respected | <input type="checkbox"/> Not well-adjusted | <input type="checkbox"/> Temperamental | <input type="checkbox"/> Opinionated |
| <input type="checkbox"/> Reserved | <input type="checkbox"/> Well-adjusted | <input type="checkbox"/> Unhappy | <input type="checkbox"/> Patient |
| <input type="checkbox"/> Dependable | <input type="checkbox"/> Creative | <input type="checkbox"/> Positive attitude | <input type="checkbox"/> Common sense |
| <input type="checkbox"/> Emotionally
stable | <input type="checkbox"/> Honest | <input type="checkbox"/> Socially
acceptable values | <input type="checkbox"/> Good
communicator |

To what extent is this person aware of their own shortcomings?

- Adjusts for them appropriately Ignores them Unknown

Additional comments pertinent to our evaluation. _____

Would you like to receive more information about Free Arts Minnesota? Yes No

Signature _____ Date _____

office use only: Date received _____

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Fax (612) 338-5060 • info@freeartsminnesota.org • www.freeartsminnesota.org