

New Day Women's Center

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(619) 713-1544 newdaywomenscenter@gmail.com

Volunteer Reference Form

Reference for: _____ Date: _____

Your Name: _____ Phone: _____

Relationship to Applicant: _____ How Long? _____

The person above has applied to become a volunteer for New Day Women's Center. A volunteer can have direct contact with clients either on the phone and/or within the Center. The applicant has been asked to supply the Center with three references and your assistance will be greatly appreciated.

Some of the qualities sought in a volunteer:

- A genuine commitment to Jesus Christ as Savior and Lord
- A desire to work as a team to carry out the mission of New Day Women's Center
- Dependability, responsibility and a willingness to give of themselves to those in need
- Submission to the Center's policies and procedures and to those in leadership
- A humble attitude with grace and love for others whether staff or patrons of the Center
- To maintain a level of confidentiality in regards to the women we serve here at the Center

Please answer the questions below and write a short paragraph describing the applicant in relation to the above qualities sought in a volunteer. Please mail or email to the address above.

How would you rate the applicant on each of these qualities?

| | Excellent | Good | Fair | Poor |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Dependability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spiritual Maturity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Initiative | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please write your paragraph here. Continue on the back if you need more space:

Signature _____ Date _____