

## Volunteer Application—Referee Form

Dear Referee,

The applicant named on this form has applied to be a volunteer with Milton Public Library's 'Leading to Reading' program, which pairs teens with school-aged children to help them practice and develop their reading skills. The library screens volunteers by asking for written references. Your responses are confidential. Please complete this form, seal it in the envelope provided by the applicant, sign it across the flap of the sealed envelope and return it to the applicant. Please note that Milton Public Library may contact you to confirm the information provided in this form. Thank you for your assistance and for taking the time to complete this form.

Referee:						
Referee:Name (Please Print)			Signature			
Contact Number:			Date:			
What is your relationship to the volunte	er applicant?					
How long have you known the applicant	?					
On a scale to 1 to 5, please indicate how the appropriate number, where 1 = not			nal chara	acteristio	cs apply	to this applicant. Please
Dependability	1	2		4	5	Unknown
Ability to work independently	1	2	3 3	4	5	Unknown
atience	1	2	3	4	5	Unknown
Ability to relate to children	1	2	3	4	5	Unknown
Sense of responsibility	I	2	3	4	5	Unknown
	garding this	applican	t that yo	u feel m	ay be he	Ipful. Please attach add
Please make any additional comments re	Sa. a s c					
Please make any additional comments re comments on a separate page.	.8a. a8 a					

The Personal information on this form is collected under the authority of the Public Libraries Act and the Municipal Freedom of Information and Protection of Privacy Act. This information will only be used for the proper administration of the library and the provision of library services and programs by Milton Public Library. Questions related to the collection of this personal information should be directed to the Deputy Chief Librarian, Milton Public Library, 1010 Main Street East, Milton, L9T 6H7.