



Church Leader Reference

Please complete the reference form and send to Heart of the Cumberland.
For your convenience a pre-addressed stamped envelope is attached.

Name of Volunteer Applicant					
1. How long have you known the applicant?					
2. How frequently does the applicant attend church?					
<input type="checkbox"/> Regularly	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Seldom	<input type="checkbox"/> Don't know		
3. How has the participant participated in church life?					
4. How would you describe the applicant's spiritual maturity?					
<input type="checkbox"/> 1 Not Very	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5 Very	<input type="checkbox"/> Don't know
5. From your knowledge of the applicant, how would you rate them on the following attributes?					
Compassionate	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Mature	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Trustworthy	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Modest Appearance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Keeps Confidences	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Cooperative	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> Don't know	
Not very			Very		
6. Would you without hesitation recommend this applicant to represent Heart of the Cumberland as a volunteer?					
<input type="checkbox"/> Yes	<input type="checkbox"/> With reservation	<input type="checkbox"/> No	<input type="checkbox"/> Don't know		
Signature			Date		
Position					