

Reference Recommendation Form
(*MUST be filled out for volunteers under age 18*)

Please have two people fill out the following information for any volunteer under 18 years of age. References can be a SOMA coach, a neighbor, a guidance counselor, etc. **No relatives, please.**

Special Olympic Volunteer Name: _____

Reference #1

How long have you known the volunteer named above? _____ Years _____ Months

What is your experience with the candidate? (E.g. Business, Civic, Social, Church, etc.)

To your knowledge, is there any reason why the candidate should not be allowed to volunteer with individuals with intellectual disabilities? _____ Yes _____ No

If yes, please explain:

Does the candidate display qualities of integrity and commitment? _____ Yes _____ No

Please explain, and cite examples if possible:

Would you recommend the candidate to volunteer with Special Olympics, MA? _____ Yes _____ No

Your Signature: _____

Printed Name: _____

Address _____

City, State, Zip: _____

Phone Number: _____

Reference #2

How long have you known the volunteer named above? _____ Years _____ Months

What is your experience with the candidate? (E.g. Business, Civic, Social, Church, etc.)

To your knowledge, is there any reason why the candidate should not be allowed to volunteer with adults with intellectual disabilities? _____ Yes _____ No

If yes, please explain:

Does the candidate display qualities of integrity and commitment? _____ Yes _____ No

Please explain, and cite examples if possible:

Would you recommend the candidate to volunteer with Special Olympics, MA? _____ Yes _____ No

Your Signature: _____

Printed Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____