

Palliser Regional Schools Volunteer Reference Check Form

SCHOOL:			
NAME	OF VOLUNTEER:		
NAME OF REFEREE:		PHONE:	
is distr		(e.g. coach/supervisor) volunteer in our school. It als working in this type of volunteer assignment. You have been ble to respond to a few questions.	
1.	In what capacity do you know	?	
2.	Have you ever observed	working with children/youth?	
3.	Based on your observations, can you describe	attitude toward children/youth?	
4.	Can you describe his/her approach to engaging in	n activities with children/youth?	
5.	Has ever had a difficul	t situation to manage with youth or parents? If yes, how did	
	he/she approach the situation?		
6.	If you have observed	_ interaction with parents, can you describe the nature of the	
	relationship?		
7.	Would you describea	as collaborative or a team player?	
8.	Do you have any comments or concerns regarding	ng working with children/youth at	
	the elementary/secondary level?		