



Lift Up A Child's Voice.  
Lift Up A Child's Life.

### CASA Volunteer Reference Form

Applicant's name: \_\_\_\_\_ Date: \_\_\_\_\_

Do you feel you know the applicant well enough to give a reference?  Yes  No

How long have you known the applicant? \_\_\_\_\_ In what capacity have you known the applicant?

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How would you describe his/her relationship with children, including his/her own children? Check all applicable choices.

impatient  well liked  friendly  distant  understanding  stern

other \_\_\_\_\_

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Respond to each of the following questions. If your response is "no", please provide an explanation.

- Yes  No Would you entrust a child into his/her care?
- Yes  No Would you recommend the applicant for a position that includes a close relationship with a child or parent in an abusive/neglectful situation?
- Yes  No Do you consider the applicant to be dependable?
- Yes  No Do you consider him/her to be emotionally stable?
- Yes  No Do you believe the applicant is able to keep information confidential?
- Yes  No Would you be comfortable having the applicant as an advocate for a member of your family?
- Yes  No To your knowledge, is the applicant in good health?

How would you rate the applicant's ability to be objective in *not* judging others' behavior or lifestyles?

- very acceptable
- somewhat bothered by lifestyles different from his/her own
- critical of others who live and act differently



Hearland United Way  
Serving Hall, Hamilton, Howard and Merrick Counties

Serving Hall, Hamilton, Howard and Merrick Counties  
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Heartland United Way  
Community Partner

Respond to each of the following questions. If your response is "yes", please provide an explanation.

- Yes  No To your knowledge, does the applicant have a drinking or drug problem?
- Yes  No To your knowledge, has the applicant ever had his/her driver's license revoked?
- Yes  No To your knowledge, has the applicant ever been accused, arrested or convicted of a crime?

Describe the applicant's ability to be flexible.

- Excellent  Good  Average  Fair  Poor

How would you describe the applicant's friendships? Check all applicable choices.

- Few friends, constantly changing  Few friends, loyal
- Many friends, constantly changing  Many friends, loyal
- Average friends/friendships  No friends
- Other \_\_\_\_\_

To what extent is the applicant aware of his/her shortcomings?

- Feels he/she has none  Ignores them
- Strives to overcome them  Other \_\_\_\_\_

Check as many of the following as you believe to describe the applicant:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> domineering      | <input type="checkbox"/> cooperative   | <input type="checkbox"/> a leader       |
| <input type="checkbox"/> a follower       | <input type="checkbox"/> temperamental | <input type="checkbox"/> confident      |
| <input type="checkbox"/> opinionated      | <input type="checkbox"/> friendly      | <input type="checkbox"/> unhappy        |
| <input type="checkbox"/> aggressive       | <input type="checkbox"/> nervous       | <input type="checkbox"/> reserved       |
| <input type="checkbox"/> happy            | <input type="checkbox"/> assertive     | <input type="checkbox"/> well adjusted  |
| <input type="checkbox"/> lacks confidence | <input type="checkbox"/> considerate   | <input type="checkbox"/> moody          |
| <input type="checkbox"/> arrogant         | <input type="checkbox"/> stubborn      | <input type="checkbox"/> lazy           |
| <input type="checkbox"/> trustworthy      | <input type="checkbox"/> honest        | <input type="checkbox"/> procrastinator |

Please comment on anything you know about the applicant that would particularly qualify or disqualify him/her for this position.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_