

Cornell Cooperative Extension Volunteer Applicant Reference Questionnaire

Applicant's Name _____ Your Email: _____

Volunteer Position desired _____

Your Name _____ Your Phone Number: _____

1. How long have you known the applicant and in what capacity? _____

2. Do you think the applicant would do well as a Cornell Cooperative Extension _____?
(Title of Position)

Please explain why or why not. _____

3. Please use this chart to evaluate the applicant's qualities.

| | Excellent | Good | Fair | Not Known |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Understanding of (population the volunteer will be serving) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dependability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flexibility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to work with youth | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to work with adults | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Responsibility/follow through | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to organize | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Respect for others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social Skills, openness, acceptance of others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. Do you feel the applicant is a good communicator? Consider verbal and written communication skills. _____

4. How does this person respond to stressful situations? _____

5. Are you aware of anything that might make the applicant ineffective or *unsuitable* in a volunteer relationship with other people? If yes, please explain. _____

6. **(Include this question only if applicant would do ongoing unsupervised work with minors, individuals over 65, or individuals with disabilities.)** Would you be willing to place a child or vulnerable adult whom you were responsible for under this person's leadership? ____yes ____no
If not, please explain. _____

7. If you have ever ridden in a vehicle driven by the applicant were you comfortable with the way this person drove? If not, please explain. _____
8. Additional comments: _____

Thank you for your candid opinion. Be assured that your comments will be held in strictest confidence to the fullest extent permitted by law.

Signature of interviewer _____ **Date:** _____