

**Community Volunteer Program
Reference Form**

1. Applicant's Name: _____

2. Your Name: _____

3. Address: _____

4. Telephone: _____

5. How long have you known the applicant? _____

6. In what capacity have you been associated with the applicant (i.e. -civic organization, Church, NA/AA, Professional, etc.)

7. Would you consider the applicant to be a responsible and sensitive individual?

Explain: _____

8. Do you Know of any problems that would hinder the applicant's role as a Community volunteer? _____

9. Special Comments _____

Reference Signature _____ Date _____

Please return **two completed** reference forms to the following address:

NPCWW
C/O Programs Staff
PO Box 1277
Lexington, NC 27292