

Geisinger Volunteer Program Adult Recommendation Form

Please review and complete this recommendation form for the individual named below who is a candidate for service with the Geisinger Volunteer Program. All responses will be treated as confidential.

Recommendation For (Volunteer Name):		
Address:		
City:	State:	Zip:

Your Name:		
Address:		
City:	State:	Zip:
Cell Phone:		
E Mail Address:		

How Long Have You Known the Applicant?
What is your Relationship to the Applicant?

Please rate the applicant honestly on the following criteria:

	<i>Poor</i>	<i>Fair</i>	<i>Good</i>	<i>Excellent</i>	<i>Unknown</i>
Dependability					
Integrity/Honesty					
Attendance/Punctuality					
Personal Appearance					
Responsibility					
Commitment					
Decision Making					
Gets along with others					
Takes Direction					

Please check one of the following:

<input type="checkbox"/>	I would strongly recommend this applicant for volunteer work.
<input type="checkbox"/>	I would recommend this applicant for volunteer work.
<input type="checkbox"/>	I would recommend this applicant with reservations . (Please elaborate below)
<input type="checkbox"/>	I would not recommend this applicant. (Please elaborate below)

Please provide a more detailed explanation of your above answers:

Printed Name of Reference

Signature of Reference

Date

Please send completed and signed recommendation form to:

Volunteers@geisinger.edu

or

Geisinger Volunteer Services
100 North Academy Ave – MC 01-17
Danville, PA 17821