Virginia Master Naturalist Program Volunteer Reference Form Rivanna Chapter Winter/Spring



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2 1/1	is applying to work with the Virginia Master Naturalist program as olunteer in the Rivanna Chapter and has listed your name as a reference.				
a v	olunteer in the Rivanna Chapter and has listed your name as a reference.				
age and	e Virginia Master Naturalist program is sponsored by a group of Commonwealth of Virginia state encies. Virginia Master Naturalist volunteers carry out natural resource education, citizen science, is stewardship service projects in their communities. Their volunteer work may include leading and ucating other people, including youth.				
the	e Virginia Master Naturalist program and its sponsoring agencies seek your assistance in selecting most qualified people to serve in volunteer roles. We will appreciate your prompt completion of this erence form.				
WOI	ase share your impression and knowledge of the applicant's qualifications for performing volunteer rk, including possible education programs with youth. Understand that the reason we ask these estions is to ensure the safety of all people participating in our programs.				
	How long and in what capacity have you known the applicant?				
•	Thow long and in what departy have you known the applicant.				
•	How would you describe the applicant's personal characteristics?				
•	Do you feel that there are any issues that would interfere with the applicant's ability to care for children under his/her supervision – anything that would endanger the child's well-being? If yes, please provide some information.				
•	Due to safety issues, rules and guidelines must be followed in the Virginia Master Naturalist program. Please comment on the applicant's willingness and ability to operate within a structured program.				
•	How would you describe the applicant's ability to handle records and money?				
•	Is there any reason why this person should NOT be considered for this volunteer position? YES or NO. If YES, why not?				

Please evaluate the candidate on the following characteristics:

	Excellent	Good	<u>Fair</u>	Not Known
Ability to work with youth				
Ability to work with adults				
Communication skills				
Organizational skills				
Dependability				
Willingness to help others				
Resourcefulness				
Respect for others				
Leadership potential				
Positive attitude				

Thank you for taking the time to complete this reference form. We appreciate your assistance in helping the Virginia Master Naturalist program select the most qualified people to serve in volunteer roles. Please feel free to be in touch with us if you have any questions at rivannamn.info@gmail.com or call (434)974-7233 or email Marilyn Smith, RMN Chapter President at mareseatoats73@gmail.com

PLEASE RETURN THIS COMPLETED FORM TO: Rivanna Master Naturalists PO Box 8284 Charlottesville, VA 22906

Reference Name (printed)	
Signature	
Date	