

Reference Form

Name of Applicant: _____

Your name: _____

1. Comment on how long you have known the applicant and the nature of your relationship:

2.	Rank the applicant on the following personal qualities and characteristics.
	Please mark with a bold " X " over the appropriate response. A line has been
	provided below each item for comments if necessary.

1 – Excellent 2 – Above Average 3 – Average 4 – Needs Improvement NA - Not able to comment

Christian commitment/lifestyle	1	2	3	4	NA
Comment:					
Communication skills	1	2	3	4	NA
Comment:		2	5	-1	

Relates well to others Comment:	1	2	3	4	NA
Leadership abilities Comment:	1	2	3	4	NA
Teachable, able to absorb new information Comment:	1	2	3	4	NA
General outlook and approach on life Comment:	1	2	3	4	NA
Flexible, adaptable Comment:	1	2	3	4	NA
Heart and ability to Volunteer Comment:	1	2	3	4	NA
Able to work well with others. Comment:	1	2	3	4	NA
Completes assigned tasks, responsible Comment:	1	2	3	4	NA

3. Please mark in **bold or circle** all of the following words which best describe the applicant

Exciting	Assertive	Insecure	Sophisticated	
Earnest	Sympathetic	Opinionated	Gentle	
Self-assured	Steady	Polished	Somber	
Wholesome	Arrogant	Unassuming	Pushy	
Withdrawn	Selfless	Conventional	Generous	
Impatient	Charitable	Compliant	Courteous	
Careful	Content	Understanding	Arrogant	
Depressed	Responsive	Serious	Transparent	
Talkative	Tolerant	Domineering	Flexible	
Trusting	Enthusiastic	Shy	Self-centered	
Well-liked	Controlling	Cheerful	Rude	
Patient	Timid	Respectful	Careless	

4. Please circle the following sentence:

A. I would recommend this individual for a QHOP internship program

B. I would recommend with reservation this individual for a QHOP internship program.

C. I would not recommend this individual for a QHOP internship program.

5. Is there anything important you feel like we should be aware of concerning this applicant - behaviour/spiritual life/health relating issues.

7. Please recommend another reference whom we could contact.

Name:	
Email Address:	
City:	
Country:	
Phone Number:	
Relationship to applicant:	

Please return the completed reference to: info@qhop.ca