

Reference Form

Na	ame of Applicant:							
Yo	our name:							
1.	Comment on how long you have kno relationship:	wn the appl	icant a	nd the i	nature o	of your		
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							
	NA - Not ab	le to comme	ent					
	Christian commitment/lifestyle Comment:		2	3	4	NA		
	Communication skills Comment:		2	3	4	NA		

Relates well to others	1	2	3	4	NA
Comment:					
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 of	lescribe
the	e 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Withdrawn	Selfless	Conventional	Generous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	follov	ving	sentence:
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- 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.

o. I	applicant - behaviour/spiritual life/health relating issues.

•	. 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