

Example reference request form

For a supply of headed paper contact the Volunteering Team on 01604 611681 or email volunteering@mndassociation.org

Prospective Volunteer Details		Referee Details	
Name		Name	
Address		Address	

The above named person has applied for the voluntary role of **XXXXXXXXXX** with the **XXXX Branch/Group** of the MND Association.

The purpose of this role is **xxxxxxxxxxxxxxxxxxxx**

Skills or experience that would be helpful

- Good organisational skills
- Good interpersonal skills
- Effective written and oral communication skills
- Ability to empathise with people affected by MND
- Desire to make a positive difference for people with MND

We would be grateful for the following information.

How long have you known this person? _____ years

In what capacity? _____

Are there any reasons why we should not accept the applicant as a volunteer?

What skills do you feel that the applicant will bring to the role?

Do you have any other comments?

Referee's signature: _____ Date: _____

Please return to:

Insert relevant details