

**LARIMER COUNTY DEPARTMENT OF HUMAN SERVICES
CHILDREN, YOUTH & FAMILY VOLUNTEER REFERENCE FORM**

Volunteer Program Applicant: _____

The Children, Youth & Family Division(CYF) Volunteer program of Larimer County Department of Human Services would appreciate your assistance in providing us with a written reference for the above mentioned individual. We thank you in advance for your time and cooperation.

Many of the families who become clients of The Children, Youth & Family (CYF) have histories of abuse, neglect, and/or involvement with the criminal justice system. CYF Volunteer Program matches adult volunteers with families and children based on their needs. Adult volunteers are expected to engage with adults and children who are clients, community members or agency professionals. Volunteers must be mature, responsible, individuals who have the ability to relate to and work well with people from all walks of life. The information you provide will help us determine this applicant's ability to be a good volunteer.

The information you provided will be accessible to the Volunteer program staff and will otherwise be kept confidential.

General Information:

Your Name: _____

Phone #: _____ Alternate Phone: _____

Email address: _____

Relational Questions:

- 1) What is your relationship to and how long have you known the potential participant?

- 2) What strengths does this applicant have that might relate to working with our clients?

- 3) Explain how this person copes with stressful situations:

- 4) Explain how this person adapts to differences among people:

- 5) How has this applicant demonstrated commitment in the past?



