|  |
| --- |
| **2016-17 CHRIST HOUSE**  **YEAR-LONG VOLUNTEER REFERENCE FORM** |

|  |
| --- |
| **Thank you for serving as a reference!**  Christ House is a 24 hour medical respite facility in Washington, DC for men and women who are homeless and sick. Founded in 1985 in the tradition of the ecumenical Church of the Saviour, it is a place where homeless individuals with acute medical needs receive medical treatment along with rest, nourishment, and social services.  **Logo**In order to fulfill its mission, Christ House relies on volunteers of many occupations. ***These volunteers must be dedicated to serve, committed to poverty and justice issues, open to learn and able to accept those who may be quite different from themselves.***  We appreciate your thoughtful evaluation of the candidate’s qualifications and recommendation of their participation in the Christ House Year-Long Volunteer Program. Additional information (letter of recommendation, etc.) is also welcome in addition to this form.  \*Please note: A candidate’s application packet is not complete until all reference forms have been submitted. A timely return of this form is much appreciated!  SUBMIT FORMS DIRECTLY TO: [**YLV@christhouse.org**](mailto:Lizzie.Bebber@christhouse.org)  **Subject: YLV Reference Form for APPLICANT FIRST AND LAST NAME**  If you have any questions about Christ House or the year-long volunteer application process, please contact:  **Lizzie Bebber, Coordinator of Year-long Volunteers, 202/328-1100 x265.** |

**GENERAL INFORMATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Reference Name** |  | | |
| **Applicant Name** |  | | |
|  |  | | |
| **Mailing Address** |  | | |
| **City, State, Zip** |  | | |
| **Primary Phone** |  | **Alternate Phone** |  |
| **Email Address** |  | | |
|  |  | | |

**BACKGROUND INFORMATION:**

1. **In what capacity do you known this applicant?**

**Employer or supervisor**: Can speak to *work ethic and character.*

**Professor, advisor or pastor**: Understand the *motivations for service.*

**Roommate:** A non-family member he/she has lived with in the past two years who can offer *perspective about him/her as a potential roommate and community member.*

|  |  |  |
| --- | --- | --- |
|  | | |
| **2. What are the applicant’s top three strengths that will aid them to work in a professional role at Christ House?** | | |
|  | | |
| **3. How have you observed this applicant’s commitment to poverty and social justice?** | | |
|  | | |
| **4. Christ House year-long volunteers live together at Emmanuel House, a large row house just around the corner from Christ House. They live alongside 6-7 other volunteers whom they have likely never met before and must treat one another with dignity, respect and an openness to each other’s differences. They also meet together weekly for a meal and intentional time of sharing.**  **How do you foresee the applicant succeeding or struggling in the community described above?** | | |
| **5. Please indicate your overall recommendation of this applicant by placing** **an ‘X’ next the appropriate rating.** | | |
|  | Highly recommend | |
|  | Recommend with confidence | |
|  | Recommend with reservations | |
|  | Do not recommend | |
|  |  | |
|  | **\*If recommended with reservations or not recommended, please explain:** | |
|  |  | |
|  | | |
| **CONFIDENTIALITY STATEMENT**  *The Privacy Act is a federal law which states that everyone has the right to know and receive information of copies of documents which are maintained about them by agencies. This law provides that Christ House may keep the identity or the source of this reference confidential only if you request it be kept confidential. By placing an ‘X’ in the appropriate box, please indicate below whether you do or do not wish your identity to be revealed to the applicant.* | | |
|  | **I do not authorize Christ House to identify me as the source of this reference, nor do I authorize Christ House to release a copy of this reference in its entirety to the applicant. I realize that a summary of this reference may be released without my approval.** | |
|  | **I authorize Christ House to identify me as the source of this reference, and to release a copy of this reference, upon request, to the applicant.** | |
|  | | |
| **Electronically Signed by:** | | **Date:** |

**\*\*\*PLEASE EMAIL COMPLETED FORMS DIRECTLY TO:**

[**YLV@christhouse.org**](mailto:Lizzie.Bebber@christhouse.org) **(via email attachment)**

**Subject: YLV Reference Form for APPLICANT FIRST AND LAST NAME**

*If you have any questions about Christ House or the year-long volunteer program, please contact:* ***Lizzie Bebber, Coordinator of Year-long Volunteers, (202) 328-1100, x265.***