

**Reference Letter Form**  
**for Individuals Seeking to Work with Children and Youth**  
**Mt. Sylvan UMC**

\_\_\_\_\_ is applying to become a volunteer with the children's or youth ministry at Mt. Sylvan UMC and has given your name as a personal reference.

The person in this volunteer position will be in close contact with children and/or youth, and we want to ensure that these relationships will be healthy ones. Please complete this form and submit it to Libba McCluskey at Mt. Sylvan. You can submit this form digitally to [libba@mtsylvan.org](mailto:libba@mtsylvan.org) or mail it to the church office at 5731 N Roxboro St, Durham, NC 27712.

**Please evaluate this person honestly – your response will remain entirely confidential.**

1. Describe your relationship with this applicant.

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2. How long have you known the applicant?

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Please use the following scale to respond to questions 3 through 8:

1 – low      2 – below average      3 – average      4 – very good      5 – excellent

How would you rate the applicant in the following areas? Circle one number on the scale:

- |                                       |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|
| 3. Involvement in peer relationships  | 1 | 2 | 3 | 4 | 5 |
| 4. Emotional maturity                 | 1 | 2 | 3 | 4 | 5 |
| 5. Resolving conflict                 | 1 | 2 | 3 | 4 | 5 |
| 6. Following through with commitments | 1 | 2 | 3 | 4 | 5 |
| 7. Ability to relate to students      | 1 | 2 | 3 | 4 | 5 |
| 8. Spiritual maturity                 | 1 | 2 | 3 | 4 | 5 |

9. What are the applicant's strengths?

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10. Do you have any concerns about this person working with students?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If yes, please explain:

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**If you check "yes," we will contact you to learn more.**

Thank you for taking the time to fill this form out! If you have any questions or would like to speak to someone regarding this applicant, please call the Mt. Sylvan office at (919) 471-0032 and ask to speak to Libba McCluskey.

Your name (printed): \_\_\_\_\_

Signature: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_