



Department of Human Resources

200 Elizabeth Street • Charleston, WV 25311 • Phone: (304) 348-7770 • Fax: (304) 348-7711

VOLUNTEER REFERENCE FORM

Applicant Information (please print)

Name: _____ Date: _____

Location at which applicant has applied to volunteer: _____

I am providing a reference for the above named applicant (please print)

Name/Title: _____ Phone: _____

Address: _____

Signature: _____ Date: _____

1. How long have you known the applicant? _____

2. In what capacity do you know the applicant? _____

3. Do you feel the applicant is appropriate for interaction with school aged children? ____

4. Please comment on the applicant’s integrity, attitude and dependability.

5. Please share any additional information about the volunteer applicant.

Please return completed form to:

Kanawha County Schools
Attn: Gwen Embrey
200 Elizabeth Street
Charleston, WV 25311

Email: gembrey@mail.kana.k12.wv.us

Thank you for taking the time to complete this reference form!
Your input is greatly appreciated and will remain confidential.

Please note that reference forms will not be kept on
file without a corresponding volunteer application.

Kanawha County Schools is an Equal Opportunity Employer.