



# STEP VA, INC.

P.O. Box 42154 • Fredericksburg, VA 22404

[www.stepva.org](http://www.stepva.org)

## Volunteer Applicant Reference Form

Please provide two references with your application.

REFERENCE FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

For the following questions, if you require more space, please feel free to attach an additional page.

Please describe the applicant's qualifications to serve as a volunteer with STEP VA.

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In what ways do you see the applicant as someone who can relate to children and adults with disabilities in a class or summer camp setting?

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What kinds of challenges, if any, do you foresee for the applicant as they work with people with disabilities?

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Please add any other comments about the applicant that may help us better understand their ability to volunteer with our organization.

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### REFERENCE CONTACT INFORMATION

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please mail the completed form to:

Jan Monroe, executive director  
STEP VA, P.O. Box 42154, Fredericksburg, VA 22404  
OR scan and email it to [stepvainc@gmail.com](mailto:stepvainc@gmail.com).

Thank you for your time.