



Indiana Conference of Seventh-day Adventists

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For School Use
Date Received: _____
Circle One: NFU SFU

Confidential Employee and Volunteer Recommendation Form

Dear Friend:

I, _____ have applied to be either a volunteer or employee at an Indiana Conference school. Your honest evaluation of my abilities will allow the administrators to make wise and safe personnel decisions. Thank you for helping me with this process. After completing this form, please return it to the Indiana Conference office using the envelope provided. If you answer yes to any of the questions below, you have my permission to discuss your concerns directly with administrators at the hiring organization.

Applicant's Signature: _____

- Yes No 1. Does the applicant have any physical, mental or emotional conditions that would interfere with his/her performance of the typical duties of an elementary school teacher's aide/volunteer?
- Yes No 2. Have you ever observed the applicant interact with a child in a manner that you thought was inappropriate or made you feel uncomfortable?
- Yes No 3. Would you have any concerns about entrusting the care of **your** child to this person?

Which of the following best describe your perception of this person? (Please check all that apply.)

- | | | | | |
|---|--|---|---|---|
| <input type="checkbox"/> Positive | <input type="checkbox"/> Outgoing | <input type="checkbox"/> Tolerant | <input type="checkbox"/> Negative | <input type="checkbox"/> Loses interest in projects. |
| <input type="checkbox"/> Impatient | <input type="checkbox"/> Shy | <input type="checkbox"/> Trustworthy | <input type="checkbox"/> Assertive | <input type="checkbox"/> Patient |
| <input type="checkbox"/> Good Leader | <input type="checkbox"/> Good Follower | <input type="checkbox"/> Organized | <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Energetic |
| <input type="checkbox"/> Overschedules | <input type="checkbox"/> Aggressive | <input type="checkbox"/> Even-tempered | <input type="checkbox"/> Easy to anger | <input type="checkbox"/> Gets stressed easily |
| <input type="checkbox"/> Far too Grace Oriented | <input type="checkbox"/> Far too Legalistic and Works Oriented | <input type="checkbox"/> A Happy, Well-Adjusted Christian | <input type="checkbox"/> Tends to Talk About People Behind their Back | <input type="checkbox"/> Both Liked and Respected by Children |

Information About You:

Name of Person Completing this Recommendation Form

How do you want us to contact you if we have questions?

- Cell Phone: _____
- Work Phone: _____
- Home Phone: _____
- e-mail: _____

How Long Have You Known the Applicant?

Please Briefly Describe Your Relationship to the Applicant? How do You Know Each Other?

Additional Comments About the Applicant: _____

Signature of Person Completing this Recommendation Form

Date