

# Diocese of Peterborough

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## # 1020, Record of Reference Check (Medium and High Risk Positions)

Date: \_\_\_\_\_ Parish: \_\_\_\_\_

Volunteer: \_\_\_\_\_ Group/Ministry \_\_\_\_\_

Reference: \_\_\_\_\_

Telephone (Res.): \_\_\_\_\_ Telephone (Bus.): \_\_\_\_\_

Contacted by: \_\_\_\_\_

1. How long have you known the volunteer? \_\_\_\_\_
2. In what capacity do you know him/her? \_\_\_\_\_
3. What is your current relationship with the volunteer? \_\_\_\_\_
4. What are the volunteer's strengths and weaknesses in regard to working with others (specify what group the volunteer will be working with: children, seniors, vulnerable adults)?  
\_\_\_\_\_  
\_\_\_\_\_
5. How would you feel about the volunteer working one-on-one with your family members (children or elderly relatives)? \_\_\_\_\_  
\_\_\_\_\_
6. How would you describe the personality and temperament of this person?  
\_\_\_\_\_  
\_\_\_\_\_
7. How does this person handle supervision or working independently?  
\_\_\_\_\_  
\_\_\_\_\_
8. Is there any reason you know of why the person would not be able to perform the duties necessary for this position?  
\_\_\_\_\_
9. Is there anything else you would like to tell me about this volunteer? \_\_\_\_\_  
\_\_\_\_\_

### Information Collection:

Personal information on this form will be used for Screening of Volunteers. This information will be stored permanently in a confidential locked cabinet in the Parish Rectory. Any questions with respect to this information should be directed to the local pastor or the Diocesan Screening Committee 350 Hunter Street West – Box 175, Peterborough, Ontario, K9J 6Y8. Phone: (705) 745-5123 Fax: (705) 745-2555, Original File– Diocesan Pastoral Centre.