

Farm of the Child Reference Form

Farm of the Child is a Catholic faith-based organization which attempts to share the face of Christ with those in the remote village of Trujillo along the northern coast of Honduras. Farm of the Child is comprised of an orphanage, clinic, chapel, and primary school with volunteers serving in each aspect of the project. Volunteers make a 26 month commitment to living in community, sharing their lives with those around them whether it be working, eating, playing, praying, etc. Based on your knowledge of the candidate, please assess how well suited he/she would be to life as a volunteer with Farm of the Child.

Name: _____

Address: _____ Telephone: _____

_____ Best time to call: _____

E-mail: _____ Fax: _____

Candidate's Name: _____

For how long and in what capacity have you known the candidate? _____

Please rate the candidate on the following characteristics:

Characteristics	Excellent	Above Average	Average	Below Average	Poor	Unable to Rate	Comments
Common sense							
Compassion							
Creativity							
Enthusiasm							
Flexibility							
Friendliness							
Helpfulness							
Honesty							
Humility							
Initiative							
Leadership skills							
Maturity							
Motivation							
Open to direction							
People skills							
Responsibility							
Sense of humor							
Sincerity							
Spirituality							
Team player							
Work ethic							

Additional Comments: _____

Please answer the following questions, providing as many examples as possible. Feel free to attach additional sheets if needed.

1. How well do you think the candidate would fit into a missionary lifestyle? What experiences has s/he had which may have helped prepare her/him for volunteer life?

2. Please describe the candidate's strengths and weaknesses.

3. How does the candidate deal with conflict with others?

4. Please describe the candidate's spiritual life. How well would s/he fit into a faith community?

5. Overall, how would you rate the candidate? Please explain.

_____ Recommend without hesitation
_____ Strongly recommend

_____ Recommend with reservation
_____ Withhold recommendation

Signature _____ Date _____

Thank you for your time and effort in filling out this recommendation. Your responses will greatly assist us in our selection process. Please send your completed form to the below address by _____.

Mike Frisby
P.O. Box 2487
Avon, CO 81620