S.A.Y. Yes![®] Centers for Youth Development REFERENCE for S.A.Y. Yes![®] PERSONNEL

(no relatives, please)

Applicant NAME _

The above individual is applying to become a staff member or volunteer at the above named S.A.Y. Yes![®] Center. People in this position are in close contact with children, youth, and/or adults who may have struggled with life controlling problems, and we desire to be as certain as possible that these relationships will be healthy ones. We would appreciate your assistance in helping us determine this person's suitability as a volunteer by responding to the following questions. Thank you for your cooperation.

Please return this form to the applicant in a sealed envelope for confidentiality.

Your Name							
Address							
City	State	Zip Code		Phone ()		
How long and in what rela	tionship have you known	the applicant? _					
How well would you say y	ou know him/her?	very well	u well	average	not very well	not at all	
Please use the following s	cale to respond to the qu	estions below.					
1 = Not Known	1 = Not Known 2 = Poor 3 = Below Average 4 = A			rerage 5 = Excellent			
Rate his/her involvement in peer relationships.				Rate his/her emotional maturity.			
Rate his/her consistency in commitments.			Rate his/her ability to relate to children.				
Rate his/her response to authority.				Rate his/her sensitivity to the needs of others.			
Place a check by the follor Team Player Reliable Humble Sensitive Spiritual Risk Taker Do you have any reservati If yes, please explair	Thorough Honest Flexible Patient Energetic Faithful	ant's suitability as		npered < er at our S.A.Y		Iyes ❑ no	
Signature		Print Name			Date		