



Big Sky Strategic Ministries Rev. 9-1-2017

Volunteer Reference Questionnaire

This reference must be mailed (emailed) by the party completing the Questionnaire.

Applicant's Name:	Date:
<p>This applicant is applying to serve as a volunteer for Big Sky Strategic Ministries at Scholarship Camp. We value your input as a person who knows the applicant. The following questions are provided for your consideration to assist in your recommendation of qualified individuals, who demonstrate godly characteristics, to be involved in this vital ministry to children and youth. Thank you for your time, interest, and participation in our child protection program!</p>	
<p>1. What is your relationship with the applicant? <input type="checkbox"/> Pastor <input type="checkbox"/> Ministry Leader <input type="checkbox"/> Friend <input type="checkbox"/> Family Member FOR Pastor or Awana Commander or Awana Director or Ministry Leader:</p>	
<p>1a. Is the applicant a regular attendee of your church? <input type="checkbox"/> Yes; <input type="checkbox"/> No</p>	
<p>1b. Is the applicant actively serving in your church? <input type="checkbox"/> Yes; <input type="checkbox"/> No. In what ministries?</p>	
<p>1c. Has your church or Awana Club performed a background check on the applicant? <input type="checkbox"/> Yes; <input type="checkbox"/> No</p>	
<p>2. How long have you known the applicant and in what capacities?</p>	
<p>3. How familiar are you with the applicant? <input type="checkbox"/> Acquaintance <input type="checkbox"/> Working Relationship <input type="checkbox"/> Friend. <input type="checkbox"/> Close Friend. <input type="checkbox"/> Family Member.</p>	
<p>4. How does the applicant relate to others? <input type="checkbox"/> Frequent Problems <input type="checkbox"/> Occasional Problems <input type="checkbox"/> Rarely a Problem <input type="checkbox"/> Very Well.</p>	
<p>5. Please rate the emotional maturity of the applicant. <input type="checkbox"/> Mature <input type="checkbox"/> Immature.</p>	
<p>6. Have you observed the applicant interacting with children? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>7. Have you ever witnessed the applicant losing his/her temper? <input type="checkbox"/> Yes; <input type="checkbox"/> No. If yes, please explain, how did they handle it?</p>	
<p>8. To your knowledge, has the applicant ever had problems with drugs or alcohol? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>9. To your knowledge, has the applicant ever been investigated, charged, arrested and/or convicted of an unlawful offense? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>10. Is there any fact or circumstance about the applicant's behavior, conduct, background or any other information that would call into question the advisability of entrusting the applicant with the supervision, guidance, and care of young people? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>11. Do you know of any circumstance about the applicant that would compromise this ministry? <input type="checkbox"/> Yes; <input type="checkbox"/> No. <i>If you answered YES to any question 8-11, please explain (use the back or additional pages as necessary):</i></p>	
<p>12. Would you consider the applicant to be a team player? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>13. Does the applicant get along well with children? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>14. Can the applicant handle change, or is he/she flexible? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>15. Does the applicant frequently follow through on his/her commitments? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>16. Would you entrust your own children to this person? <input type="checkbox"/> Yes; <input type="checkbox"/> No.</p>	
<p>17. Can you recommend the applicant for work with or around children and youth without any reservation? <input type="checkbox"/> Yes; <input type="checkbox"/> No. <i>If you answered NO to any question 8-11, please explain (use the back or additional pages as necessary):</i></p>	

Name (print):	Signature:
Phone:	Email:
<p><i>For additional comments or information (use the back or additional pages as necessary).</i> Send completed application to: Dave Ruthardt, Camp Director, PO Box 344. Freedom, WY 83120; OR bssm.camp@gmail.com with "Volunteer Reference for <i>Applicant's Name</i>" in the subject line.</p>	