



Instructions

STUDENT: The Catawba Valley Health System Volunteering application process requires two teacher references. Please give this form to one of your current teachers. This form will not be returned to you. Your teacher will submit the form directly to the guidance counselor or intern coordinator.

TEACHER: Please evaluate this student in the following areas to assist us in determining their qualifications for serving as a Volunteer. Submit this form directly to the guidance counselor or intern coordinator. This process ensures confidentiality is maintained.

Questions? Please contact Kelli Webber- Volunteer Services Coordinator at 828-326-3434.

Thank You!

Student Information

Student Name	School Name	Date

Reference Information

Please use the following rating scale to assess this student in each category.

Unsatisfactory	Below Average	Average	Above Average	Outstanding
1-2	3-4	5-6	7-8	9-10

Ability to work with others		Demonstrates honesty and integrity	
Uses good judgment		Effective written communication skills	
Shows initiative		Has effective oral communication skills	
Enjoys challenges		Has excellent attendance	
Accepts responsibility		Shows enthusiasm for learning	
Maintains positive attitude		Displays maturity	
Accepts constructive feedback		Can be a positive role model for others	
Produces quality work		Is adaptable/flexible	
Has high degree of self-discipline		Utilizes good time management	

Question

What strengths do you believe the applicant will bring to our health system as a volunteer?

Additional Comments:

Reference Information

Class	Date
Name	Signature