



Volunteer References

| NAME OF VOLUNTEER | |
|--|-----------------------------------|
| IDENTIFY THREE (3) PERSONAL REF | FERENCES. (Do not list relatives) |
| NAME | |
| ADDRESS | |
| RELATIONSHIP | |
| NAME | |
| | |
| | |
| RELATIONSHIP | |
| NAME | |
| ADDRESS | |
| TELEPHONE | |
| RELATIONSHIP | |
| I understand it will be necessary for Holston Home for Children to check my character references. I hereby give my consent for this information exchange and authorize such persons to release any information requested by Holston Home for Children. I hereby release my references, Holston Home for Children, it's staff, and others from any liability or damages from having furnished any information regarding me. | |
| Volunteer Signature | Date |
| Volunteer Coordinator | Date |