



JUST of DuPage Volunteer Reference

You are being contacted because _____ is applying to serve as a volunteer with JUST of DuPage inside the DuPage County Jail, and you are someone who can comment on his/her ability to serve successfully in this setting. Please be as thorough and honest as possible in your responses. We ask that you return this form as soon as possible to the email or mailing address listed below.

Thank you.

Your Name

Date

Name of Volunteer Applicant

How long have you known this person?

In what capacity did you get to know this person?

Do you consider this person a good listener? Please comment.

Is this person good at working with people with very different opinions from their own? Please comment.

Is this person able to be flexible and agreeable when the unexpected happens? Please comment.

Do you have any concerns about this person serving inside a correctional facility? If so, what are they?

Overall, do you think this person would be a good fit for serving inmates in the DuPage County Jail?

Thank you for your honest input. Please return this form to Sarah Buki at one of the following:

Email: sarahbuki@justofdupage.org

Fax: 630-407-2403

Mail: JUST of DuPage
P.O. Box 1253
Wheaton, IL 60187



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