

## REFERENCES FOR ADULTS, AGE 18+

Please provide two personal/professional references using the following form. Each reference must be provided by an individual who:

- has known you for at least 1 year
- is not related to you, and
- is at least 18 years old.

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By sig	ning below, I confirm the following:		
1.	I know("Applicant") in either a personal or professional capacity;  Print Name of Volunteer Applicant		
2.	I am at least 18 years of age and am not a relative of Applicant;		
3.	I am not aware of any reason that Applicant should not be permitted to volunteer on behalf of Ability Tree First Coast (ATFC), and		
4.	I do not possess any information that would cause me to believe Applicant would pose any undue risk to Ability Tree's MVPs (individuals with disabilities) or others who participate in ATFC programs.		
Signed	d: Printed Name:		
Date:	Relationship to Applicant:		
	ence #2 uning below, I confirm the following:		
5.	I know("Applicant") in either a personal or professional capacity;  Print Name of Volunteer Applicant		
6.	I am at least 18 years of age and am not a relative of Applicant;		
7.	I am not aware of any reason that Applicant should not be permitted to volunteer on behalf of Ability Tree First Coast (ATFC), and		
8.	I do not possess any information that would cause me to believe Applicant would pose any undue risk to Ability Tree's MVPs (individuals with disabilities) or others who participate in ATFC programs.		
Signed	d: Printed Name:		
Date:_	Relationship to Applicant:		
Organ	ization/Institution (if applicable):		