

# Companion Cycling – Confidential Volunteer Reference

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This is a reference for: \_\_\_\_\_ (name of volunteer)

Referee  
Name:

Address:

Tel. no:

The above person has applied to become a volunteer for Companion Cycling and has given your name as a referee in accordance with our policy regarding children and vulnerable adults.

If you are happy to complete this reference, all the information contained on the form will remain absolutely confidential. We would appreciate you being extremely candid in your evaluation of this person.

1. How long have you known this person? \_\_\_\_\_

2. In what capacity? \_\_\_\_\_

3. What qualities does this person have which you believe would make them suitable as a volunteer?

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4. How would you describe their personality? \_\_\_\_\_

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5. Please comment on this person's suitability to work with children and vulnerable adults

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Do you know of any reason at all to be concerned about this person being in contact with children, young people or vulnerable adults. **Yes / No** (please delete as appropriate)

If you have answered 'Yes', or if for any reason we feel a need to, we will contact you in confidence.

If there is anything you would like to add about the candidate please do so overleaf or on a separate sheet.

Signed: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_\_

***Thank you for taking the time to complete this form.***

***Please scan and email the completed form to: [volunteers@companioncycling.org.uk](mailto:volunteers@companioncycling.org.uk) or alternatively post to: Philip Beer, Companion Cycling c/o 17 St James Avenue, Hampton, TW12 1HH.***