

4 – H Ontario

Volunteer Screening Committee

4-H VOLUNTEER RECOMMENDATION FORM

Name of Volunteer: _____

Membership # _____

Association: _____

NEW VOLUNTEER (Based on the completion of the Volunteer Candidate's interview and reference checks)

Recommend

Not Recommend

OR

CURRENT VOLUNTEER

Recommend

Suspend

Not Recommend

Comments:

Names of Volunteer Screening Committee Members:

- 1)
- 2)
- 3)

Volunteer Screening Committee Contact: (please print) _____

Signature: _____ Date: _____