



**AmeriCorps**  
North Carolina

**AmeriCorps Cross Cultural Education Service Systems (ACCESS) Project  
Reference Form**

\_\_\_\_\_  
(Print Name of AmeriCorps Applicant)

**TO THE PERSONAL REFERENCE:**

AmeriCorps is a national community service program supported by a partnership of federal and state governments and local communities. AmeriCorps engages more than 200,000 Americans annually in results-driven service sponsored by thousands of local and national nonprofits, public agencies, and faith-based and community organizations. AmeriCorps members help communities meet critical challenges in education, public safety, the environment, and other human needs. In return, AmeriCorps members earn a monthly stipend of up to \$20,000 for full-time and up to \$10,000 for part-time. Members are also eligible for a Segal AmeriCorps Education Award that helps pay for college or pay back student loans upon completing their service year.

The applicant is applying to be an AmeriCorps member with the ACCESS Project. Our AmeriCorps program focuses on helping immigrant/refugee residents to integrate into life in North Carolina to become self-sufficient. The applicant has indicated that you would be able to evaluate their qualifications and provide us with a candid recommendation. Considerable value is placed on personal references during the application review and selection process. Your input is greatly appreciated.

**Note: The person providing this reference CANNOT be a family member (i.e., parent, child, spouse, grandparent, uncle, etc.)**

Please complete **ALL** questions on the form, sign, and either:

- 1) return the completed form in a sealed envelope to the applicant to add to their application package or
  - 2) email it to [Khouan.cnn@uncg.edu](mailto:Khouan.cnn@uncg.edu) and type in the email subject: Reference for \_\_\_\_\_ . Thank you!
- applicant complete name*

**REFERENCE INFORMATION**

Please provide *your* contact information:

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**KNOWLEDGE OF THE APPLICANT**

How long have you known the applicant? \_\_\_\_\_ Years \_\_\_\_\_ Months

In what capacity have you known the applicant?

- Employer / Supervisor     Co-worker     Teacher / Professor     Volunteer Supervisor  
 Religious Leader     Friend     Other: \_\_\_\_\_

**WORK PERFORMANCE**

1. Please comment on the applicant's work performance in relation to the following qualities:

- a. Dependability:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. Initiative:

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c. Ability to Work Independently:

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d. Punctuality:

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e. Responsibility:

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f. Work Ethic:

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2. In your judgment, how competent is this applicant, as demonstrated by work in the community, in school, on the job, or in a position of responsibility? Please check one.

- Outstanding Performance
- Above Average Performance
- Satisfactory Performance
- Below Average Performance
- Unsatisfactory Performance

**RELATIONSHIPS WITH OTHER PEOPLE**

3. AmeriCorps members must serve and communicate with people of varied cultural, economic, educational, racial, and religious backgrounds. Please comment briefly on the applicant's relationships with other people in relation to the following qualities:

a. Cultural Sensitivity:

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b. Teamwork Skills:

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c. Flexibility:

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**EMOTIONAL MATURITY**

4. Please comment on the applicant's ability to adapt and work under difficult and changing conditions.

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**COMMITMENT**

5. The ACCESS Project requires a year-long commitment (Sept. – Aug.). During the year, challenges and obstacles are sure to arise. When an applicant does not complete their service year, it harms the program and future funding. Please describe the applicant’s ability to follow through with their commitment(s).

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**ADDITIONAL COMMENTS AND SUPPORTING INFORMATION**

6. Please highlight any strengths the applicant has that would make them an excellent candidate for the ACCESS program.

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7. Please describe any weaknesses that would challenge the applicant in their professional capacity.

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8. *Optional:* You may attach a letter to explain any of your ratings, to address any reservations you have regarding the applicant’s ability to serve, and/or to express anything else you feel is relevant to the applicant’s participation in an AmeriCorps program.

**OVERALL RECOMMENDATION**

9. What is your overall recommendation?

- I recommend the applicant for AmeriCorps service.
- I have some reservations, but I believe the applicant will succeed in serving with AmeriCorps.
- I do not recommend this applicant for AmeriCorps service.

**CONFIDENTIALITY STATEMENT**

I AUTHORIZE the ACCESS program to identify me as the source of this reference and to release a copy of this reference in its entirety upon request to the applicant.

I DO NOT authorize the ACCESS program to identify me as the source of this reference, nor do I authorize the release of a copy of this reference in its entirety to the applicant.

Signature: \_\_\_\_\_ Date Reference Completed: \_\_\_\_\_