



# SNOW BUDDIES VOLUNTEER REFERENCE LETTER

Volunteer's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Person Referring: \_\_\_\_\_

Contact Information for person referring:

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Relationship to Volunteer: \_\_\_\_\_

Years Known (circle one):    Less than 1 Year       1-3 Years       4-6 Years

Please provide in point form, information on the volunteer's suitability to volunteer for a Snow Removal Program including: dependability, reliability, trustworthiness, honesty, shows respect for others, is friendly, non-judgmental, able to follow through on commitments and any other pertinent information:

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\_\_\_\_\_

Signature of Person Referring: \_\_\_\_\_ Date: \_\_\_\_\_

The Volunteer requesting completion of this reference letter by signature is granting permission to give the information above as requested to be used in the application process to become a Snow Buddy volunteer.

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

Please mail, fax or scan and e-mail completed reference letters and registration form to:  
Mail: Merisa Kriwez, Safety at Home Program Coordinator  
H-N Community Senior Support Services  
230 Victoria St., Simcoe ON, N3Y 4K2  
Phone: 1-800-265-2818 ext.209  
Fax: 519-426-8303  
Email: [mkriwez@seniorsupport.ca](mailto:mkriwez@seniorsupport.ca)



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