

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

To Whom It May Concern:

The enclosed form has been provided for you to review and complete for  
\_\_\_\_\_ who has applied for a part-time contract position  
with  
\_\_\_\_\_ Extend-A-Family.

We offer a variety of programs whereby support is provided by a worker for a child or adult who has a physical and/or developmental disability. Depending on the program \_\_\_\_\_ would provide support for this individual with regards to working towards specific goals, and/or providing a break/relief for the parents, and being a friend to an individual with a disability.

It would be greatly appreciated if you would complete the form based on your involvement with the above named applicant and return it to our office by fax, email, or mail.

I would like to thank you in advance for your time in assisting us with this process.

Respectfully,

Michelle Scala  
Recruitment and Volunteer Coordinator  
Extend-A-Family Waterloo Region  
Ph: 741-0190 ext. 253  
Fax: 741-0392  
[mscala@eafwr.on.ca](mailto:mscala@eafwr.on.ca)



**REFERENCE INQUIRY FORM**  
(Received in Confidence)

Extend-A-Family  
91 Moore Ave  
Kitchener, ON  
N2H3S4  
Ph: 519-741-0190

**Reference for:** \_\_\_\_\_

1. How long have you known the individual(s) and in what context:  
\_\_\_\_\_
  
2. Please state some of his/her **strengths** that would be valuable in his/her role as a Support Worker/Provider to a person with developmental and/or physical disabilities:  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Please comment specifically on the following for the above individual(s):
  - a) Ability to deal with **stress or conflict**:  
\_\_\_\_\_
  
  - b) **Communication** skills (Written, verbal):  
\_\_\_\_\_
  
  - c) **Compassion/empathy** for others:  
\_\_\_\_\_
  
  - d) **Relationships** with others:  
\_\_\_\_\_
  
  - e) Community **involvement**:  
\_\_\_\_\_
  
  - f) **Reliability** and **responsibility**:  
\_\_\_\_\_
  
  - g) Ability to work **independently/initiative**:  
\_\_\_\_\_
  
4. Please indicate any areas that **need strengthening** and/or any **concerns** you may have about the individual(s) as a Support Worker/Provider to a person with developmental and/or physical disability:  
\_\_\_\_\_  
\_\_\_\_\_
  
5. Would you **recommend** the individual(s) for hire in this type of work:  
\_\_\_\_\_

**Reference From:**  
(please print) \_\_\_\_\_  
**Signature:** \_\_\_\_\_  
**Occupation:** \_\_\_\_\_

**Date:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_  
**Employer:** \_\_\_\_\_