



Reference Inquiry for Guidance Counselor/Teacher  
2026 Youth Volunteer Program

Each applicant must complete at least two reference inquiries. This reference inquiry must be completed by a current teacher or guidance counselor. If returned to the student, the reference inquiry must be in a sealed, signed envelope.

Student's Name \_\_\_\_\_ Current Grade \_\_\_\_\_

Personal Evaluation of Applicant

Evaluation

Yearly Letter Grade Average: \_\_\_\_\_ (Any F's? \_\_\_\_\_ )

Number of Days Absent, Current School Year: \_\_\_\_\_

Number of Days Tardy, Current School Year: \_\_\_\_\_

Please list and explain any behavioral/conduct issues, as well as any documented instances of the applicant being sent to ISS or OSS, or being written up for any reason:

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

Would you recommend that we accept this application? Yes \_\_\_\_\_ No \_\_\_\_\_

Please briefly describe why you would recommend this applicant:

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
School

Thank you for helping make this opportunity available to your students. Please send this completed form to UNC Health Rockingham Volunteer Services, 117 E. Kings Highway, Eden, NC 27288 by April 6, 2026.

\*\*\*\*If this form is given back to the student to turn in please place in a sealed envelope with signature on flap.