REFERENCE FORM

(Volunteer or Work Experience)

Applicant name:			
Reference name:			
Organization:			
Position:			
Telephone:			
Email:			
How long have you known the applicant?			
In what capacity have you known the applicant?			
Please respond to the following: 1. Please describe those skills that you believe the applicant possesses that will assist them in successfully completing a social work education program. (For example, you may describe the applicant's skill level in such areas as interpersonal communication, writing, and time management)			

2. Please describe in social work.	n what ways you believe that the applicant is sui	ted to the profession of
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	as applicable, upon the applicant's past or poter ocial work practice with Indigenous peoples.	ntial
Signature:	Date:	

Ensure that the **<u>subject line</u>** of the email states the following information:

Social Work Program Application: References for FirstName LastName and include either ISWD or IBSW

Send to: Registrar@ytced.ca

^{*} Please email by **April 15, 2021**