



STATE OF FLORIDA  
GUARDIAN AD LITEM PROGRAM

**PERSONAL REFERENCE CHECK**

\_\_\_\_\_ has applied to be a Guardian ad Litem volunteer. The Guardian ad Litem Program trains volunteers in the community to provide independent representation of the best interests of children in court proceedings. Your name was given as a personal reference and your input is being solicited as part of the Program's background check. Please fill out this form and return it. If you need more space to answer a question, you may write on the back of this sheet or use a separate sheet of paper. Thank you for your prompt assistance.

NAME OF PERSON  
GIVING PERSONAL REFERENCE:

\_\_\_\_\_  
(Please print or type name)

How long have you known this person? \_\_\_\_\_ Professionally or personally?  
\_\_\_\_\_

Have you ever observed this person with children? Y/N If yes, what are your impressions of the interaction?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you recommend this person to work in a volunteer capacity with children alleged to be victims of abuse or neglect? Explain.  
\_\_\_\_\_  
\_\_\_\_\_

How do you describe this person's ability to work effectively with others?  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Phone Number

Are you interested in learning more about becoming an advocate for an abused or neglected child? Y/N \_\_\_\_\_