

Letter of Recommendation



Letter of Recommendation for: _____

Dear _____,

The individual listed above has applied to be a **Volunteer Guardian ad Litem (GAL)** for Richland County CASA in Columbia, South Carolina, and has provided us with your name as a reference. As a GAL, the applicant will be court-appointed to act as an unbiased representative for children involved in cases of abuse and/or neglect. After attending thirty hours of training, the applicant will be responsible for performing an independent investigation of the allegations, making recommendations based on those findings, as well as appearing in court on behalf of the child. Our volunteers must be able to function within the precepts of confidentiality and objectivity, and above all must be dedicated to protecting a child's best interest.

Your assessment of the applicant's capability, reliability, and responsibility would be greatly appreciated. Please be as specific as possible with your comments. Your cooperation in responding to this letter is appreciated. Please complete this appraisal form, and mail it in the enclosed reply envelope. Please call the Volunteer Coordinator at (803) 576-1590 if you have any questions or comments. Thank you for your help.

PLEASE RETURN WITHIN FIVE DAYS

**ALL INFORMATION WILL BE HELD CONFIDENTIAL IN EVERY RESPECT
(Please print clearly)**

1.) In what capacity have you known the applicant? _____

For how long? _____

2.) Do you have knowledge of how the applicant relates to children? Yes No
If yes, please explain: _____

3.) Can the applicant separate personal life from volunteer work experience? _____

4.) The situations and information that the applicant will have access to as a GAL are highly confidential. Do you feel that he/she can maintain confidentiality of information?

5.) Check as many of the following as describe the applicant:

- | | | | | |
|--------------------------------------|----------------------------------|--------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Domineering | <input type="checkbox"/> Nervous | <input type="checkbox"/> Friendly | <input type="checkbox"/> Assertive | <input type="checkbox"/> Tactful |
| <input type="checkbox"/> Leader | <input type="checkbox"/> Happy | <input type="checkbox"/> Aggressive | <input type="checkbox"/> Considerate | <input type="checkbox"/> Cooperative |
| <input type="checkbox"/> Reserved | <input type="checkbox"/> Moody | <input type="checkbox"/> Opinionated | <input type="checkbox"/> Dependable | <input type="checkbox"/> Well-adjusted |
| <input type="checkbox"/> Arrogant | <input type="checkbox"/> Unhappy | <input type="checkbox"/> Stubborn | <input type="checkbox"/> Confident | <input type="checkbox"/> Lacks Confidence |

6.) Would applicant have problems in working with any of the following:

Racial minorities Females Males Handicapped

Various religious preferences Explain: _____

7.) How well does the applicant finish projects and activities begun?

- Very well Well Average Fair Poor

8.) To your knowledge, has the applicant ever had a drinking or drug problem? _____

9.) Do you know of any personal experiences in the applicant's present situation or background that would make a judge question his/her objectivity, judgment, or credibility? _____

10.) Do you feel that the applicant is in a position to make an eighteen month commitment to a child? _____

11.) Do you have any reservations about this applicant being a GAL? _____

Please feel free to make any additional comments that will be helpful to CASA in deciding

whether the applicant will be suitable as a GAL: _____

Signature

Date

May we contact you if we have any questions? _____

Phone Number: _____

Thank you for your help!!!