

## Citizen Review Panel for the Child Protection System

Date:  
To:

\_\_\_\_\_ has applied to be a volunteer panel member reviewing the county child protection system in \_\_\_\_\_. Enclosed is a volunteer Citizen Review Panel job description.

**The applicant has given your name as a reference.** Please answer the questions listed below. Please return the completed form in the enclosed, addressed, postage paid envelope **within one week**. Thank you.

1. How well do you know the applicant?

Very Well \_\_\_\_ Well \_\_\_\_ Little \_\_\_\_ Very Little \_\_\_\_

2. Please describe your relationship with the applicant (co-worker, friend or ?):

3. When was the last time you had contact with this person?

4. How responsible is the applicant?

Very \_\_\_\_ Usually \_\_\_\_ Seldom \_\_\_\_ Never \_\_\_\_ Don't Know \_\_\_\_

Comments:

5. Do you have any concerns that the applicant may have problems keeping information they learn about other people confidential?

6. Why do you think this person may be interested in working on this panel?

7. Since this panel is concerned about children's safety, could you describe any experience (paid or unpaid) this applicant has had that would help in this position?

8. How does the applicant handle situations in which individuals in a group have different opinions and must reach a decision?

(over)

9. What do you think is the most important thing this applicant can add to a panel reviewing the child protection system?

10. If you have any more information or comments that you feel would be helpful, please include them in the space below.

Dated: \_\_\_\_\_  
Signature of Reference

If you would like to discuss something further, please call Anita Keyes at (651) 296-4589. The information you provide will not be shared with the volunteer applicant without your permission.

**Thank you for taking the time to fill out this reference.**

Minnesota Department of Human Services  
444 Lafayette Road North  
St. Paul, Minnesota 55155-3832

Updated: 6-18-02