RFC Undergraduate Volunteer Referral Form: 2018

**\*Please note that this referral form is for applicants who are interested in participating with the RFC medical clinic services. This opportunity is open to all current UCR undergraduates.**

**\*\*Referrer must know student in a professional capacity - can not be an undergraduate.**

[ ]  Letter is confidential. I waive my right to view this referral form.

[ ]  Letter is not confidential. I do not waive my right to view this referral form.

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| **Students Name:**  | **Students Signature (can be typed):**  |

**Referrals will be accepted NO later than Friday, May 4th, 2018 at 11:59 pm.**

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| **Name of Evaluator:**  | **Title/Position:**  |
| **Email:**  | **Place of employment:**  |
| **Date:**  | **Evaluator Signature (can be typed):**  |

*To be filled out by the evaluator and emailed to Jonathan Do at* rfcugadmissions@gmail.com

1. **How long have you known the student, and in what capacity? Please limit your response to 300 words or less.**
2. **Please check the box that pertains to the student’s ability in each of the listed skill sets.**

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| **Initiative** | **Explanation/Comments:** |
| [ ]  Excellent[ ]  Above Average[ ]  Average[ ]  Below Average |  |

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| **Communication Skills** | **Explanation/Comments:** |
| [ ]  Excellent[ ]  Above Average[ ]  Average[ ]  Below Average |  |

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| **Intellectual Ability** | **Explanation/Comments:** |
| [ ]  Excellent[ ]  Above Average[ ]  Average[ ]  Below Average |  |

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| **Desire to Serve** | **Explanation/Comments:** |
| [ ]  Excellent[ ]  Above Average[ ]  Average[ ]  Below Average |  |

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| **Reliability** | **Explanation/Comments:** |
| [ ]  Excellent[ ]  Above Average[ ]  Average[ ]  Below Average |  |

*To be filled out by the evaluator and emailed to Jonathan Do at* rfcugadmissions@gmail.com