

# CLASS A & B VOLUNTEER CERTIFICATION *(17 & Younger)*



**Special Olympics**  
Delaware

To: Special Olympics Delaware - Director of Volunteers

Date: \_\_\_/\_\_\_/\_\_\_

This is a letter of reference for \_\_\_\_\_ who is applying to be a  
*(Applicant)*  
Volunteer and/or Unified/Peer Partner with Special Olympics Delaware.

I have known \_\_\_\_\_ for \_\_\_\_\_  
*(Applicant)* *(Length of time)*  
in my capacity as a \_\_\_\_\_ at  
*(Your title, role, knowledge of applicant)*  
\_\_\_\_\_. Based on my interaction with  
*(Organization/Company Name)*

this person, I believe that she/he would make a good candidate for a volunteer with your organization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Provide your contact information below:

Print Name: \_\_\_\_\_

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-Mail: \_\_\_\_\_

*Please add any additional comments that you would like to share on the back of this form.*

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