



# RESCUENET US

## REFERENCE FORM

The person presenting this form has applied for membership with RescueNet US. RescueNet is an Emergency Relief program which professionally trains and rapidly deploys volunteer personnel into disaster events in order to help stabilize the situation, typically over a 1-4 week period.

When completing this form please remember the applicant may be exposed to extreme levels of warfare, disease, sickness, banditry, violence, stress, trauma, personal injury, and personal deprivation such as lack of sleep, lack of food, lack of fresh air, lack of shelter, lack of security, etc.

Depending on your relationship with the applicant, we understand that you may not be able to fully answer all the questions, but we appreciate your efforts to answer those you can. Please be as thorough as possible. Feel free to add another sheet of paper if necessary. Thank you for your time.

**Applicant's Name:** \_\_\_\_\_  
First Surname

Under what circumstances have you known the applicant? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

How would you describe the applicant's psychological, emotional and physical stabilities? \_\_\_\_\_

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Does the applicant suffer from disorders of any kind? \_\_\_\_\_

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Do you think the applicant would cope and work well under stress/pressures/extreme circumstances? Why or why not?

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Does the applicant have any prejudice against any other race, nationality, culture or religion? \_\_\_\_\_

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How does the applicant perform in the following areas?

Teamwork \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Following directives/instructions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Diplomacy/Confidentiality \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reliability/Loyalty \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Scholastically / Academically \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Your Name:** \_\_\_\_\_  
First Surname

Home Phone Mobile Phone Email

\_\_\_\_\_  
Signature Day/Month/Year



# RESCUE<sup>NET</sup> US

## REFERENCE FORM Mailing Instructions

**Thank you for your time to complete this form.  
Please return it directly to the Registrar, not the applicant. *You do not need to include this page.***

**Mail To:**

**RescueNet US**  
452 E. Silverado Ranch Blvd.  
#452  
Las Vegas, NV 89183-6209

Phone: 702.723.8326 / Fax: 888.497.3620  
[registrar@rescuenetus.org](mailto:registrar@rescuenetus.org)  
[www.rescuenetus.org](http://www.rescuenetus.org)

**Note: While we accept digital copies and faxes to expedite the application process, the application will not be fully processed until we receive your *original, signed* reference form.**