



## RSVP VOLUNTEER REFERRAL FORM

Date \_\_\_\_\_

I would like to refer:

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

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

His/her age (circle one)? child (1-12 yrs) adolescent (13-18 yrs) young adult (19-44yrs)

Baby Boomer (45-63yrs) older adult (64 or older) Unknown

Does he/she presently volunteer? Yes No Unknown

If yes, where? \_\_\_\_\_

Will he/she need assistance with transportation? Yes No Unknown

Comments: \_\_\_\_\_

Referred by:

My Name is: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

I am a: (circle one) RSVP Volunteer RSVP Station Representative Other: \_\_\_\_\_

### Return form to:

#### RSVP+ Southern Valley

Office Location: 1919 North University Drive Ste D 129

Mailing Address: P.O. Box 6050 Dept 2020  
Fargo, ND 58108-6050

Linda K. Nelson, Project Director - Phone: (701) 231-9751  
[Linda.K.Nelson@ndsu.edu](mailto:Linda.K.Nelson@ndsu.edu)

OR

Teresa Huff, Project Coordinator – Phone: (701) 231-9753  
[Teresa.Huff@ndsu.edu](mailto:Teresa.Huff@ndsu.edu)

