



Volunteer Verification

Please take the time to complete the following volunteer verification form as part of this student's education plan towards obtaining a Certificate in Birth Doula Studies from College of the Rockies.

Name of Student: _____

Name of Organization/Workshop: _____

Supervisor or Verifying Professional (your name): _____

Number of Hours: _____

Please answer the following questions:

1. Was the student helpful? : YES NO

Briefly explain:

2. Did the student display professional behaviour? YES NO

Briefly explain:

3. Briefly describe the student's responsibilities at this event.

4. Do you feel the student displayed the appropriate authenticity and desire to work with childbearing families? YES NO

Briefly explain:

5. Would you recommend this student as a doula? YES NO

Briefly explain:

Thank you for your time!

Your signature

Date