



BIRTHWISE MIDWIFERY SCHOOL

Reference Form for Applicants to the DONA Doula Scholarship

Dear _____, as a part of my application for consideration of Birthwise Midwifery School's DONA doula workshop scholarship, I have been asked to a reference from an individual who has personal and/or professional knowledge of and can attest to my character and qualities. **Please complete this form, sign it and send it via email, mail or fax it directly to:**

Melissa Mayo, Birthwise Midwifery School, 24 South High St., Bridgton, ME 04009; fax (207) 647-5919 melissa@birthwisemidwifery.edu. Thank you very much for your time and effort on my behalf. *If scanning and emailing, please convert to a PDF document before sending. Thank you.*

Applicant's Name _____

Reference's Name _____ Title _____

Address _____

Phone _____ Email _____

How long have you known the applicant? _____

In what context do you know the applicant?

Please comment on the strengths and qualities you see in this applicant that you believe will serve them in their work as a doula in your community?

Signature _____

Date _____